MEDICAL LIBEASE

Medical MAY 1942 Fronomics



Reasons why we say...

"Try S-M-A for Infant Feeding"

Physicians will find that S-M-A* is not a "compromise formula." It is a complete milk formula for infants deprived of human milk.

• Cow's milk fat is replaced with the unique S-M-A fat for easy digestion and adequate nutrition. It compares physically, chemically and biologically with the fat in human milk.

 The carbohydrates in S-M-A and human milk are identical.

• With the exception of vitamin C, the vitamins essential to normal growth and development (B₁, D, and A) are included in adequate proportion in S-M-A ready to feed

• Furthermore, iron (so difficult to provide for the bottlefed infant) is included in S-M-A. When prepared each quart provides 10 mg. iron and ammonium citrate.



*S.M.A. a trade mark of S.M.A. Corporation, for its brand of food especially prepared for infant feeding—derived from tuberculin-tested cow's milk, the fat of which is replaced by animal and vegetable fars, including biologically tested cod liver oil; with the addition of milk sugar and potassium chloride; altogether forming an antirachitic food. When disulted according to directions, it is essentially similar to human milk in percentages of protein, far, carbohydrate and ash, in chemical constants of the fat and physical properties.



S.M.A. CORPORATION . 8100 McCORMICK BOULEVARD . CHICAGO, ILLINOIS

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THI-PLEX

An outstanding success, proven by quantities sold and repeat orders received, prompts us to formulate a capsule of B Complex for those who prefer this type of medication.

CAP-SO-LOIDS

B-REX

Vitamin B Complex as contained in Brewers' Yeast, to which has been added Thiamine Hydrochloride, Riboflavin, Vitamin Bo, Nicotinic Acid and Iron.

DOSE: One or two capsules one to three times a day.

THERAPEUTIC INDICATIONS

Capsoloids B-Rex are indicated for prevention or treatment of beriberi, and treatment of neuritis, polyneuritis, and anorexia of dietary origin. They may be used advantageously when diets are inadequate in vitamin B, B₂, or other components of the B complex.

Capsoloids B-Rex are valuable in securing optimal growth of children, particularly in cases involving difficulty in utilizing, in a normal manner, foods which are sources of these vitamins.

Capsoloids B-Rex are indicated to prevent or correct specific vitamin their circumstance in persons who, because of idiosynerasy, allergy, gastroinstinal lesions, or faulty eating habits, take an inadequate diet. They are also useful for persons whose need for vitamin B, and the vitamin B complex is increased—growing children, pregnant or lactating women, Persons whose metabolism is increased by infection, hyperthyroidism, or propose muscular activity.

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GAL-MUTH

Each fluidounce represents:

Bismuth Subgallate 40 gm.

Iodine, in organic combination 1-10 gm.

With Kaolin, Thymol and Methyl Salicylate

DOSE: Two or three teaspoonfuls every 2 or 3 hours as may de needed.

A preparation highly recommended and indorsed by the profession for use in the treatment of dysentery, colitis and kindred conditions, coating and acting as a mild antiseptic to inflamed intestinal mucosa.

EXMIN

Each fluidounce represents:

With Menthol, Thymol and Methyl Salicylate

Isopropyl Alcohol 233/4 %

FOR EXTERNAL USE ONLY

Directions: Apply the lotion full strength or diluted (according to the severity of the case) to the affected parts, and allow to dry spontaneously.

Indicated in Eczema, allergic skin conditions and can be said to be almost a specific in treatment of poison ivy or poison oak.

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721 N. High Street

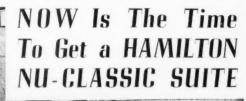
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Now is the time to brighten up your office. Make it more inviting to patients by getting a complete suite of Hamilton's

classic Modern Medical Furniture. This beautiful homelike niture will add so much warmth and cheer to your office that too, will find it a more pleasant place to work in. See it today.

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An Adjunct in Your Practice When Treating HAY FEVER • ASTHMA • ROSE FEVER (Seasonal)

You Can Substantially Control Patient's Environment with the Accurately Fitted

Weaver NASAL FILTER



A proved aid in the relief of dust and pollen allergies

Used personally by many physicians. Fitted by more than 700 leading surgical and physicians' supply houses.

The only fully adjustable nasal filter which we individually fit to each patient. Proper contact with the nostril at all points insures comfort and ease of breathing WITHOUT PERMITTING LEAKAGE OF UNFILTERED AIR.

Scarcely visible—may be worn constantly during pollen season or whenever patient is exposed to inhalant allergens or most irritating dusts.

Because of present war limitations on travel, the Weaver Nasal Filter becomes a particularly useful adjunct in those conditions where a "change of pollen climate" is necessary to insure relief.

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Medical Economics

THE BUSINESS MAGAZINE OF



THE MEDICAL PROFESSION

MAY 1942

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The world's most eugenic bird!

NO BIRD ever had the prenatal care Swan had—we mean Swan Floating Soap, of course.

And as a result, no purer soap is made!

We consulted many specialists and general practitioners before Swan was born.



They told us our new soap should contain no harmful alkalis—and it doesn't. They said it should have no free fatty acids, no coloring matter, no strong perfumes—and it hasn't. They said it should be mild—and by actual bathing tests made on hundreds of babies, Swan has been proved milder than even the finest imported castiles!



We've told you about this wonder new floating soap—the first really we one since the Gay Nineties—for reasons.

First, because it meets the medical pression's standards for purity, Swan's soap you'll want to recommend to present the standards for babies and every washingtoness.

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use Swan at your office, for face and had and in your shower.

Try a cake of Swan . . . with our of pliments. Write to Lever Brothers of pany, Cambridge, Mass., Dept. E.5.

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For your diabetic patients



I is difficult for the average diabetic to keep his equipment organized, particularly when travelling.

This B-D Bakelite Carrying Case does it for him. For \$1.75 it comes with a metal insert to hold equipment, syringe and needle sterilizing case and cotton holder. Completely equipped with syringe, needles and Busher Automatic Injector, it sells for \$5.50.

The coupon will bring you literature on B-D diabetic equipment, some of which may add materially to the comfort and convenience of your patients.

B-D PRODUCTS Mode for the Profession

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PHYSICIANS MAY QUICKLY DISPOSE OF CASES INVOLVING

Fallen Arch

HANDLING these cases has been greatly simplified for the Physician who refers them to the Surgical Supply, Shoe, Dept. Store or Foot Comfort Shop, specializing in Dr. Scholl's Arch Supports. These dealers employ Experts trained in Dr. Scholl's scientific methods of fitting.

A simple prescription like the one above suffices to insure the patient being fitted with the required type of Dr. Scholl's Arch Support. For accuracy in fitting, the patient's feet are Pedo-graphed, which not only graphically reveals the nature and degree of the arch depression, but also indicates the type of support needed to afford relief and help correct the condition.

Dr. Scholl's Pedograph graphically reveals the nature and extent of foot arch weakness.





DR. SCHOLL'S ARCH SUPPORTS and exercise relieve tired, aching feet; rheumatoidlike foot and leg pains; help restore weak of fallen arches to normal. Adjustable. Worn in any properly fitted shoe. The School of the State of the School of the

A typical case of fallen arch





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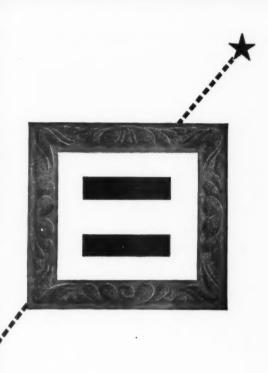
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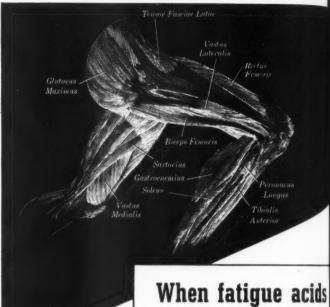


QUAL in soluble liver constituents to 2 ounces of whole beef liver . . . each Citie idounce of Berron* also contains ferrous iron. All elements needed for red cell mation are quickly available from this easily digested fluid preparation. BEPRON legical therapy for "iron deficiency" anemias as it supplies not only iron, but other nutritional factors for the formation and production of normal erythro-M. The administration of one and a half ounces of BEPRON daily in such cases usually followed by a rapid erythrocyte and hemoglobin response. Available all pharmacies in eight and sixteen-ounce bottles. * Reg. U. S. Pat. Off.



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Absorbine Jr. contains no strong irritants. Laboratory tests have established the effectiveness with which Absorbine Jr., without causing stasis, (figure "A") stimulates a fresh flow of blood through the peripheral areas (figure "B").

strike, suggest-ABSORBINE JR.

• Patients who have allowed the first warm days to entice them into overtaxing their muscles through violent exercise will welcome your suggestion of Absorbine Ir. For it rids many stiff muscles of fatigue acids by stimulating a fresh flow of blood through the peripheral vascular system. On receipt of personal letterhead we will send you generous sample of Absorbine Ir.

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Corrective Regulation . A. NOT TEMPORARY

SYMPTOMATIC RELIEF

rimproved bowel hygiene, the old forceful evacuants have been replaced a softening regulative agents.

restore physiologic emptying of the colon, the physician has at his command

emulsion made with Irish Moss (Chondrus crispus) containing 55 per cent my mineral oil. Creamy in appearance and consistency: devoid of oiliness. sents no difficulty of administration.

ilable in three dosage forms:

For Simple Regulation-

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KONDREMUL Plain-A palatable emulsion resistant to breakdown. Mixes well with the bowel content and permits smooth, voluntary elimination.

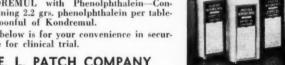
for the Milder Case-

KONDREMUL with non-bitter Extract of Cascara-A pleasant, stable emulsion containing non-bitter extract of cascara.

for the Obstinate Case-

KONDREMUL with Phenolphthalein-Containing 2.2 grs. phenolphthalein per tablespoonful of Kondremul.

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THE E. L. PATCH CO., Stoneham P.O., Boston, Mass, Dept. M.E. 5-42 Gentlemen: Please send me clinical trial bottle of KONDREMUL Plain KONDREMUL with non-bitter Extract of Address ascara City..... State KONDREMUL with Phenolphthalein NOTE: Physicians in Canada should mail cou-pon direct to Charles E. Frosst & Co., Box 247. Montreal—producers and distributors of Kondremul in Canada. (Mark preference)

Speaking Frankly



Format

Aren't you the gay young thing in your fine new suit and your bright and shining (type) face? Your new issue reached my desk as welcome as the first yellow dandelion.

Here's hoping it's a two-pants suit and that it will last for the duration.

Belle S. Mooney, M.D. Kansas City, Mo.

Our thanks to Dr. Mooney for her complimentary assortment of metaphors and to other readers who commented favorably on the magazine's new format.

Free Examinations

I believe the private physicians of the country should organize a campaign to give all people free periodic health examinations.

True, the privilege would be abused by a few and the work would cut into the practitioner's time. But—on the positive side of the ledger—such a campaign would constitute the greatest advance ever made in preventive medicine.

Even physicians on whom the

work would devolve might he expected to do it readily one they had witnessed the stuper dous number of conditions requiring medical care which me a program would uncover.

I can think of no other sind thing that would do more to be efit public health and, at the sam time, to consolidate the position of private practice.

What's your opinion?

M.D., New Yor

Wartime Efficiency

Your editorial on the need for efficiency in practice under was time conditions might have been written after observing my our community. It seems as if the amy has drained away most every young practitioner in town. Those of us who remain are being keen on the job day and night. It's clear indeed, that the answer to our problem is greater efficiency, but there are still only 24 hours day, however much the Government fools with the clock.

M.D., India

As this physician implies, we ing greater efficiency is obviously less useful than making specific productions.

YOUR Sterile READY DRESSING



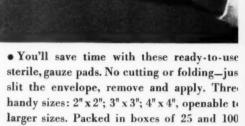
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Johnson Johnson



. . . . and so are Royal Red Star Diapers

Doctors and Nurses know that their responsibility does not end at the infant's birth but often extends for a lifetime.

We too, share in this responsibility. That is why after three years of testing, we are now able to offer a diaper made of rayon and cotton fabricated into the absorbent birdseye weave. This diaper is not only Crown-Tested but also Petal-Soft, durable and attractive.

Like us, wise doctors and nurses are concerned with the baby's comfort in early life. No wonder then, more of them are today recommending Royal Red Star Diapers to mothers. The less irritating diaper for tender baby skin.

Samples Sent on Request



George Wood Sons & Co. 512 Walnut St., Philadelphia, Pa.

cific suggestions. MEDICAL ECONOMICS therefore plans to decode increasing attention to those appects of medical practice when thoughtful planning can bring wills. This issue, for example, contains articles on the efficient planning of house calls and on the most efficient location of a secretary's desk. Other such articles will follow.

Hocus-Pocus

I have greatly enjoyed the first installments of your series on chiropractic. I showed these enlightening articles to a number of my patients; the typical reaction appears to be one of mixed amazement and delight at the exposure of so rabid and bold a cult.

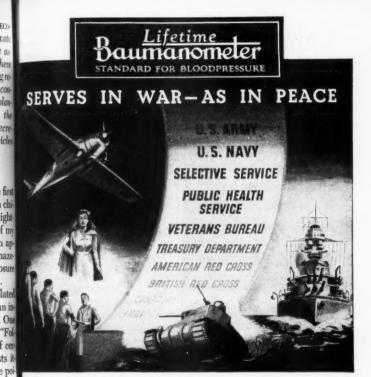
A local chiro has circulated some pamphlets which are an insult to clear-thinking people. One of the claims made is that "Following the administration of certain drugs, disease manifests itself, because these drugs are poisonous. They destroy and alter body tissue and bring on diseases."

Let's hope the medical profession can wipe out such hocuspocus and protect decent folk from deception.

J. W. Stevens, M.B. Glens Falls, N.Y.

"Thomas Edison" Carver

D. D. Palmer did not develop chiropractic, which he discovered. In fact, a clergical friend furnished the technicality necessary for its naming. Willard Carvet



MANY thousands of Baumanometers are serving our Government. We know of no Government Medical Service which does not boast of some Baumanometers . . . many of them ten, fifteen, even twenty years in service. Such performance justly deserves and has received recognition. Within the past year, the Army and Navy alone have purchased thousands of the latest KOMPAK MODEL Lifetime Baumanometer.

No duty assignment is too tough for a Baumanometer... it is built to "take it." Scientific accuracy, simplicity and ruggedness are built into every Lifetime Baumanometer. Today—when there is no time for second guesses—this is more important than ever before.

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ORIGINATORS AND MAKERS OF BLOODPRESSURE APPARATUS EXCLUSIVELY

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Salici-Vess*

EFFERVESCENCE PLUS ALKALI BUFFERS for MAXIMUM GASTRIC TOLERANCE SPEEDY EMPTYING TIME OF STOMACH RAPID ABSORPTION

 These factors combined with palatability make Salici-Vess a reliable, pain-relieving therapy in rheumatic affections, sinusitis. influenza and the common cold. In convenient tubes of 30 tablets

OTHER EFFERVESCENT PRODUCTS for Your Prescription

ACETYL-VESS Buffered Salt of Aspirin

ALKA-VESS Balanced Alkali Buffers

BROMO-VESS Effervescent Bromides

EFFERVESCENT PRODUCTS, INC. ELKHART, INDIANA

*(Buffered Salicylate-Alkali with Sodium Iodide)

was responsible for the clear, un biased, unexploited development of the principles of chiropractic The and because of the lack of promotion endeavor has not widely sold it.

If you were interested in the true principles of chiropractic whom would you investigate-D D. Palmer, its discoverer; B. Palmer, its P. T. Barnum; or Willard Carver, its Thomas Edison?

Paul O. Parr, D.C., manager Carver Chiropractic College Oklahoma City, Okla,

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Obligation to Sue

I am troubled by that letter from the physician who wrote that his collection formula is never to sue. The formula is fine-in mesce theory. But I wonder if the doo sually tor ever checked up to see how miction many patients he lost because real r they were ashamed to call him diance with their accounts so long overdue. Or if he ever checked up to mile and min see how many bankrupts he helped develop through his la collection policy.

It would be far better if physicians appreciated the inportance of some definite disposition of every account. Instead lined of the threadbare "Now, don't worry about your bill; there will be time enough to think about that later" the doctor might bet ter say: "I suggest you discus the details with my secretary; she will tell you about charges and work out a plan for payment."

Patients handled in the latter manner are far more likely to par

The Newer Concepts of Meat in Nutrition

Meat...

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and the Dietary of Elderly Persons

NILEW of the ever-lengthening span of life in the United States, ager in dietary problems of senescence llegs sume a position of importance, not may for the maintenance of vigor and sound health, but also in the mention and treatment of disease mosses characteristic of senility.

Depressed gastric secretion and deficiences which in meritary instances are associated with the document of the sully indiscriminate) dietary rehow the discount of the sully indiscriminate) dietary rehow the discount of the sully indiscriminate dietary reduced sully indiscriminate dietary rehow the discount of the sully indiscriminate dietary reduced years. A nutritionally adeque to the sull discount of t

Iderly persons require just as in protein per pound of body with as other, younger adults. Unsufficient protein-rich foods are usumed, the body cannot be mainined in nitrogen equilibrium.

Touhy¹ points out that it is practically impossible to keep down weight and avoid overtaxing carbohydrate tolerance, unless the dietary of elderly persons provides an adequate amount of proteins. Meat proteins high in biologic value, are readily converted to the body's needs, and are promptly utilized.

In addition, meat is a rich natural source of the essential B vitamins—thiamine, riboflavin, nicotinic acid, pantothenic acid, and probably other members of the B complex.

The high-starch diet, frequently preferred by the elderly because it is easy to chew, may be harmful.² Meat stimulates the secretion of digestive juices,³ thus sharpens the appetite, and improves digestion in general.

 Touhy, E. L.: A Proper and Adequate Diet for Elderly People, Minnesota Med. 23:313 (May) 1940.

2940.

2. Meyer, J.: The Management of Diseases of the Gastrointestinal Tract in the Aged, M. Clin. North America 24:9 (Jan.) 1940.

3. Boon, W. R.: The action of Meat Extracts and

 Boon, W. R.: The action of Meat Extracts and Related Substances as Gastric Stimulants in Man, Brit. M. J. 2:412 (Aug. 28) 1937.



The Seal of Acceptance denotes that the statements made in this advertisement are acceptable to the Council on Foods and Nutrition of the American Medical Association.

American Meat Institute

NICOTINE CONTENT

Scientifically Reduced to LESS than 10/



SANO cigarettes are a safe way and a sure way to reduce your patient's nicotine intake. Sano provide that substantial reduction in nicotine usually necessary to procure definite physiological improvement. With Sano there is no question about the amount of nicotine elimination. With Sano you encounter none of these variable factors involved in methods which merely ottempt to extract nicotine from

tobacco smoke. With Sano, WARNING the nicotine is actually removed from the tobacco Chemical analyses itself. Sano guarantees alshow that pinches of conton used in cigo ways less than 1% nicotine relle mouth-pieces content. Yet Sano are a deore emirely inefferin removing any lightful and satisfying smoke. Cigarettes - Cigars - Pipe Tobacco reciable and nicotine FREE PROFESSIONAL SAMPLES For Physicians HEALTH CIGAR CO. INC.

136 WEST 14TH ST. NEW YORK, N. Y.
PLEASE SEND ME PROPESSIONAL SAMPLES OF SANO
DENICOTINIZED PRODUCTS. MCCOTME CONTENT USES THAN 13
NAME
...M.D.

ADDRESS

their accounts in full. They also likely to be better boom for you than those who never pay in full.

After a cure is effected, transaction becomes one of beness. Business procedures shothen be followed.

M.D., Illin

Loggerheads

As you say, the "Political I of the American Medical A ciation" makes provocative re ing. But I'm not so sure that ganized medicine would be ter off under a two-party syst such as Author Garceau fav It might develop into something like the C.I.O. and the A.F. The parties might be constant scrapping with each other never arrive at unity. We open enough to criticism from public as it is now; it would even worse if we were at log heads with each other.

What gets me sore is the have to pay \$25 a year for sety dues. I have to, or I can keep my hospital connect About \$8 goes to the local sety; the rest to the State soo and the A.M.A. I don't begreat the \$8, because I benefit from local program. But so far as I see, I don't get a damn thing the other \$17 except the \$10 years.

M.D., New Je

Free Press

As long as we still have a press, I'd like to say that I's

DESITIN ONTMENT The External God-Liver Oil Therapy

USED EFFECTIVELY IN THE TREATMENT OF

Wounds, Burns, Ulcers, especially of the Leg, Intertrigo, Eczema, Tropical Ulcer, also in the Care of Infants

Desitin Ointment contains Cod-Liver Oil, Zinc Oxide, Petrolatum, Lanum and Taleum. The Cod-Liver Oil, subjected to a special treatment which produces stabilization of the Vitamins A and D and of the unsaturated fatty acids, forms the active constituent of the Desitin Preparations. The first among cod-liver oil products to possess unlimited keeping qualities, Desitin, in its various combinations, has rapidly gained prominence in all parts of the globe.

Desitin Ointment is absolutely non-irritant; it acts as an antiphlogistic, allays pain and itching; it stimulates granulation, favors epithelialisation and smooth cicatrisation. Under a Desitin dressing, necrotic tissue is quickly cast off; the dressing does not adhere to the wound and may therefore be changed without causing pain and without interfering with granulations already formed; it is not liquefied by the heat of the body nor in any way decomposed by wound secretions, urine, exudation or excrements.

DESITIN POWDER

Indications: Minor Burns, Exanthema, Dermatitis, Care of Infants, Care of the Feet, Massage and Sport purposes.

Desitin Powder is saturated with cod-liver oil and does not therefore deprive the skin of its natural fat as dusting powders commonly do. Desitin Powder contains Cod-Liver Oil, (with the maximum amounts of Vitamins and unsaturated fatty acids) Zinc Oxide and Talcum.

Professional literature and samples for Physicians' trial will be gladly sent upon request.

Sole Manufacturer and Distributor in U. S. A.

ESITIN CHEMICAL COMPANY

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You Can Always Rely on /IM SYRINGES

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- -for their ability to withstand pressure without leakage or backfire
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- —for their high thermal resistance to the heat of sterilization
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- —for permanency of the scale, because of a special baked-in pigment
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Your surgical dealer has all standard sizes of VIM Syringes. Order them by name: VIM.



no use for the American Medin Association. It is a dictatorial ganization which imposes its wiright or wrong. I think a division to the two-party system wo be an excellent thing, if only be cause it would help curb the attorrats.

But it probably will not conbecause physicians, for some me son or another, do not take new ideas readily.

M.D., Connection

Critique of the N.P.C.

Those who support the National Physicians' Committee—at I'm aware that a good many physicians have done so in the passhould examine certain aspects the committee's role as the Nation engages in all-out war.

The publicity obtained by the committee is undoubtedly of type which is desirable to the maintenance of private practice. Yet it seems to me that the relative value of this publicity is declining rapidly in the face of me factors.

The committee admits that is no longer lobbying against mere Wagner health insurant bill. It goes on to say that the fact makes it all the more important to obtain large amounts desirable publicity. But the argment would appear to have messes. Surely, the lack of a clark defined target for the N.P. It to bombard makes its job vast more difficult.

The trend which the N.P.C supposedly fighting is likely

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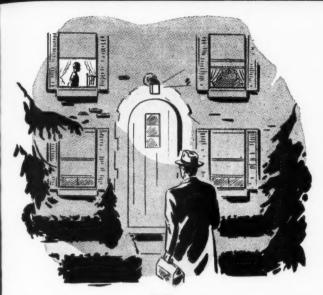
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PROLONGED Persistent PAIN

In controlling intractable pain, the repeated use of injected opiates proves undesirable, not only because of the unpleasant associations developing in the patient's mind, but also because of the inconvenience of the procedure.

Through its specific anodyne and sedative influence, Papine - - a palatable mixture of morphine hydrochloride and chloral hydrate - - provides effective pain relief on oral administration. Because it is a liquid preparation, dosage can be accurately adjusted to the situation at hand. Furthermore, the action of Papine is more prolonged than that of parenterally administered opiates, thus affording relief of pain for more than the customary 4 to 6 hours. Two teaspoonfuls of Papine are equivalent to one-fourth grain of morphine. All pharmacies dispense Papine.

BATTLE & COMPANY • ST. LOUIS, MISSOURI

PAPINE [BATTLE]

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IN SECONDARY ANEMIA SYRUP THYDRON

(Hematinic and Tonic)

- FERROUS SULFATE for prompt hemoglobin regeneration.
- VITAMIN B₁ to aid appetite, digestion, assimilation.

Syrup Thydron available in pints; Thydron Tablets in bottles of 100.

THE WM. S. MERRELL COMPANY
Cincinnati, U. S. R.

"GOOD OLD IODINE"

to combat

ATHLETE'S FOOT



The dormant germs of athlete's foot are harbored by most adults in the patches of dead or soggy skin on the feet. Iodine is a notably effective agent for killing these germs or fungi.

Suggest to your patients that, before they go to bed, all dead and dry skin be covered with mild tincture of Iodine, 2%. It is quickly applied, effective and unusually economical.

Send for free booklet describing the many uses of Iodine. Address Dept. B-5.

IODINE EDUCATIONAL BUREAU, Inc. 120 Broadway New York, N. Y.

come about as part of the drasti general changes now taking place politically, economically, and so cially in the United States. If the N.P.C. pretends effectively b buck the trend toward socialized medicine, then it is taking on the job of combating the apparent unstoppable movement toward centralization and Government control which is part and pared of the war. How can the N.P.C. effectively play its cards when it can be trumped at every tun with the statement that "thus and so is essential to the war effort?

The forces which seek to in troduce socialized medicine in this country are heard from less often these days. But this should not be interpreted to mean that medical reform has been side tracked in the interests of unity It is much more reasonable to suppose that the adherents of compulsory insurance have refrained from attempting to raise their voices above the clamor for all-out war and are engaged instead in strengthening their hand through guiding the reorientation of our society made necessarv by the war effort.

It would appear to be a tossup whether the N.P.C. will furnish the Government crowd with opposition or will merely become an easy target in the event of a showdown. It should be remembered that any vulnerability of the N.P.C. will be interpreted to the disadvantage of organized medicine and private practice as a whole. And it is very simple to



FOR TRANQUILLITY

The relief of pain, enabling a patient to obtain adequate rest, is helpful in speeding recovery.

BAYER-TABLETS OF ASPIRIN

For over 40 years Bayer Aspirin has served the medical profession as an efficient analgesic which does not interfere with curative treatment.

Bayer-Tablets of Aspirin are pure and rapidly disintegrate in the stomach.

Indicated for pain relief in a wide variety of conditions:

Colds Neuralgia
Rheumatic Affections
Dysmenorrhea

Influenza Fibrositis

Each tablet of Bayer Aspirin contains the full dosage of the pure drug. Professional samples will be sent on request.



BAYER ASPIRIN

TI VARICK STREET

NEW YORK, N. Y.

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ized ce as le to demonstrate that the N.P.C. was fathered by and is operating in the interests of the American Medical Association.

M.D., Massachusetts

Sketchy Care

I see no reason why a doctor should not treat his office nurse free of charge. Clearly, it is to his own advantage to see that she is kept in good health. And since we nurses belong to the lowest paid branch of our profession, free care is often an economic necessity.

Most of us take our positions with the understanding that medical care is to be part of our salary; but we usually find out before long that the care we receive is sketchy indeed. In fact it's not uncommon for a nurse to have her pay deducted when she is out sick.

The best arrangement would be to pay nurses a little more and then expect them to go to the physician of their choice.

R.N., California

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Pictures in this Issue

Cover, Harold M. Lambert from Frederic Lewis; pages 46, 47, and 51, Ted Leigh-MEDICAL ECONOMICS 57, Wide World; 62, Ewing Gallo way; 63 (top, center) Ewing Cal loway, (bottom) Hess; 64, Ewing Americ Galloway: 65 (top, center) Ewing Galloway, (bottom) Ted Leigh MEDICAL ECONOMICS; 68, Harold M. Lambert; 73, Press Association.

PAIDAR "PERFECTION" SUITE for Physicians. Finished in beautifully grained walnut with colorful textile leatherette sides. Stylishly designed, built for long service and enduring satisfaction. Easy to keep clean and sanitary.



20

BUY A

^{fact} he style that trapped a million eyes se to

ould Look at a Gruen n-Thin and you see for yourself r it has made h a tremendous lehit! Veri-Thin rnia a beautifully amlined silhou-- it's exquiely slim. The an-slope of the from eactually makes es and ends 50% and ner. According MICS: America's ten allofashion deers, Veri-Thin wing America's bestled watch !" wing

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he invention that worked a precision miracle—

Iyou "x-rayed" a Gruen Veri-Thin, you'd find that its mable new movement is shaped to fit the case! This muction makes room for rugged, full-size parts—gives in accuracy with high-style thinness. See the new Gruen assignal models for nurses and doctors — many with sweep second hands - at your Gruen jeweler's today. a wakhes, at Gruen jewelers only, from \$24.75 to \$250; with wastenes to \$4000. Write for free Folder "P." Address The Gruen th Company, Time Hill, Cincinnati, Ohio, U. S. A. In Canada:

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B-THIN SPECIALIST lewel Precision* ent, pink or yellow led case, Guildite . \$42.50

B. VERI-THIN TIME HILL -15 jewels, pink or yellow gold-filled case, Guildite back, matching expansion bracelet \$45.00

C. VERI-THIN HELP-MATE - 15 jewels, pink or yellow gold-filled case, Guildite back \$33.75

MY A GRUEN WATCH... BUT BUY A WAR BOND FIRST *

GRUEN VERI-THIN

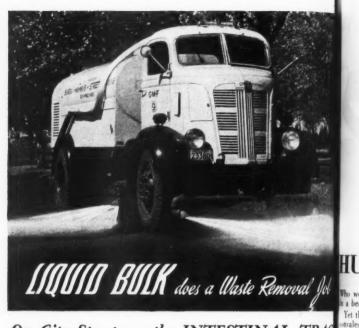


This diagram shows how the full-size, rugged working parts of the Veri-Thini it movements are brilliontly arranged to fit completely within the thini, curried case without socrificing occuracy or dependability. By this iso-genous arrangement of the wheel-train, it is possible to slope the case downward on both ends and sides for extreme thinness and streamlined styling.

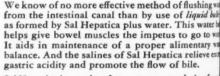
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On City Streets or the INTESTINAL TRAC



Sal Hepatica is worthy of your recommendation for or stipation in young or old. It makes a bubbling and the oughly pleasing drink. Send for interesting literate

SAL HEPATICA supplies Liquid Bulk to Help Flush the Intestinal Tract

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HUNGRY?... of Course Not!"

Who would be, after days-weeksa bed, confined indoors.

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Yet the nutritional demands of the onvalescent are certainly pressing. ACand repair processes are to be facili-

The probable answer to the jaded gwar. The probable answer to the jaded but appetite of the convalescent? Dietary ter bi reinforcement with a good source of B complex factors. D WO

For such management, White's e exc Natural Vitamin B Complex Tablets movide an excellent form of the commonly deficient vitamin B complex-easy to take and accurately standardized.

White's Natural Vitamin B Complex Tablets

These tablets supply the entire B complex, derived exclusively from

native sources. including measured amounts of Thiamine. · Riboflavin, Pyridoxine and Pantothenic Acid. The low cost-to-patient is another definite advantage. In bottles of 90 and 225 tablets.

White's Multi-Beta Liquid

For drop dosage; a stable solution of the clinically important B complex factors, readily miscible with liquid feedings and especially suitable for infant administration. Bottles of 10 cc., 25 cc., 50 cc. (Formerly known as White's Vitamin B Compound Liquid.)

White's Thiamine Hydrochloride

Tablets of Vitamin B1 Hydrochloride for oral use in B1 deficiencies. 1 mgm. and 5 mgm. tablets; bottles of 40, 100.

Ethically promoted—not advertised to the laity

HITE LABORATORIES, Inc., NEWARK, N. J.



In defense of the nation

1942—60th Anniversary—Sixty years of active duty in which time we have served the Nation during many a crisis.

Yes! We are meeting the demand and filling orders but, because our Government comes first, your orders may be delayed.

Maintain your present equipment; let us help you keep it in good repair; order only what you actually need and we will give you service as quickly and efficiently as conditions will permit.

WILMOT CASTLE COMPANY

Loyal dealers everywhere

1255 University Ave.

Rochester, N. Y.

1942

BUY DEFENSE BONDS









RANANAS .a natural sweetener

One fully ripe banana (yellow peel, flecked with brown), average size, contains the equivalent of 4 to 5 level teaspoons granulated sugar -as follows:



4.6% dextrose 3.6% levulose 12.2% sucrose .

Total sugars 20.4%

Vitamin A . . . 310-420 International Units Vitamin B, (Thiamin) . . 52-67 Micrograms Vitamin G (Riboflavin) . . . 110 Micrograms Niacin (Nicotinic Acid) . . . 75 Milligrams Vitamin C 12.5-13.7 Milligrams

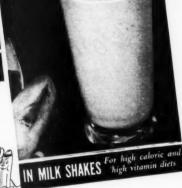
11 Essential Minerals . . . 120 Calories



MCEREALS - Sweet and nutritions

1/2 OF 1 BANANA CONTAINS 2 TO 21/2 TEASPOONS OF SUGAR

VITAMINS AND MINERALS, TOO!



REE UPON REQUEST

d edition of "Dietary Uses of the mana in Health & Disease," by L. Jean Bogert

Iducational Department 3 UNITED FRUIT COMPANY Her 3, North River, New York, N.Y. Banana Milk Shake (290 CALORIES)

1 fully ripe banana* 1 cup COLD milk *Use fully ripe banana . . . peel well flecked with brown

Peel banana. Slice into a bowl and beat with electric mixer or rotary egg beater until smooth and creamy. Add milk and mix thoroughly. Serve COLD. Makes a 10 to 12 ounce drink.

ITED FRUIT BANANAS distributed by FRUIT DISPATCH COMPANY



Notable for its H Pectin Content

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Pomfrax

WHEN DIARRHEA COMPLICATES ACUTE RESPIRATORY INFECTION

Influenza, tonsillitis, and acute tracheobronchitis are frequently ushered in by severe diarrhea. For the prompt correction of this troublesome complication, Pomfrax offers many advantages. Its high content of pectin and refined (nonirritating) kaolin quickly reduces the frequency of evacuation and allays abdominal discomfort. The generous amount of contained dextrose aids in counteracting the loss of nutrients occasioned by the rapid transit of intestinal contents. The absence of narcotics in Pomfrax is advantageous when the cough reflex must not be suppressed. Pomfrax is palatable and easily administered.

Pomfrax is available through all pharmacies in 2½ and 6 ounce bottles.

GEORGE A. BREON & CO.



Pharmaceutical Chemists

KANSAS CITY, MISSOURI

26

FOR RELIEF OF HEMORRHOIDAL PAIN

A NEW Suppository Combining...

NEW...Dual Anesthetic Action

NEW ... Stimulation of Healing

NEW...Special Hydrophilic Base

A new measure of symptomatic relief for persons suffering from hemor-rhoids and other painful ano-rectal conditions has been made possible by a new and unique development in suppository medication . . .

DIOTHOID

Anesthetic and Antiseptic SUPPOSITORIES

BLENDED ANESTHETIC ACTION-For relief of pain, two anesthetic agents are employed ... one rapid in action and transient in effect, the other gradual in action and prolonged in effect. Thus, Diothoid suppositories relieve pain quickly, yet provide comfort over a long period of time.

STIMULATION OF HEALING-Diothoid suppositories are first to employ cellregenerating action of urea to promote healing of local anal lesions.

SPECIAL HYDROPHILIC BASE—The Diothoid base, an exclusive Merrell development, causes the suppository to swell by absorbing moisture and conform to shape of lower rectum. Being miscible with mucous and serous secretions, Diothoid forms a soothing, antiseptic, healing, self-emulsified ointment that comes into more intimate contact with sur-rounding parts than is possible with cocoa butter suppositories. Disintegrates faster and remains in longer contact with tissues. No leakage or spreading into sigmoid.

OTHER ADVANTAGES-Other points of advantage found in Diothoid suppositories include their decongestive and antiseptic actions, freedom from narcotics, and correct design to facilitate insertion.

PACKAGE SIZE-Diothoid suppositories are available at prescription pharmacies in boxes of 12.

THE WM. S. MERRELL COMPANY

Founded 1828 . CINCINNATI, U.S.A.

Trade marks "Diothoid" and "Diothane" Reg. U. S. Pat. Off.		
FORMULA	THE WM. S. MERRELL COMPANY M.E. Lockland Sta., Cincinnati, Ohio Please send literature and samples of Diothoid	
(Diothane Brand) soutyl para-aminobenzoate1.0%	suppositories,	
Pledrine hydrochloride	D7	
ryquinoline benzoate 1:1000	Address	
In a special hydrophilic base containing sorbide mono-stearate.	CityState	

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ARGYROL NO CILIARY INJURY



FOR SAFE ANTISEPSIS PLUS DECONGESTION

IT HAS BEEN pointed out by many authors that the "ciliary sweep" plays an important role in throwing off upper respiratory infections. Thus a mucous membrane antiseptic which injures the cilia is defeating its own end. ARGYROL produces no ciliary injury. This is one reason why, in over 40 years of world-wide use, ARGYROL has established a remarkable record of effectiveness and safety in ridding the mucous membranes of infection. Other important reasons are:

No Systemic Toxicity: No case of systemic toxicity due to ARGYROL has ever been noted—and this despite the fact that it has been instilled into cavities as the sinuses, the bladder, and the renal pelvis where it might be unsafe to employ some of the toxic metal solutions.

Decongestion Without Vasoconstriction:

The continued use of vasoconstrictors at lead to sogginess and loss of tissue resilies cy. ARGYROL lessens turgescence but a duces no powerful artificial vasoconstition

Unique Physical Properties: ARGYROL imore than just a simple chemical gas killer. It is pus-dislodging, soothing a inflammation-dispelling. By stimulating mucous cells it effects a "physiological wasing of the mucous surface."

Controlled pH and pAg — Ultra-Fine Coloidal Dispersion. The hydrogen ion as silver ion concentrations of ARGYROL at so regulated that solutions of any streng from 1% to 50% are equally bland in non-irritating. This is not true of all obtained a silver proteins. In addition, genum ARGYROL has a much finer colloidal appersion and a more active Brownian moment.

A. C. BARNES COMPANY, NEW BRUNSWICK, N. J.

ANTISEPTIC EFFICIENCY PLUS

- 1. SOOTHING AND INFLAMMATION-DISPELLING PROPERTIES
- 2. NO CILIARY INJURY-NO TISSUE IRRITATION
- 3. NO SYSTEMIC TOXICITY
- 4. NO PULMONARY COMPLICATIONS
- 5. DECONGESTION WITHOUT VASOCONSTRICTION

SPECIFY THE ORIGINAL ARGYROL PACKAGE

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~Sidelights ~

everal questions are being asked peatedly nowadays as the posbility of military service begins stare more and more doctors the face:

How can I assure security for yfamily? How can I avoid losng my home? How can I keep
n my life insurance premiums?
low can I maintain my children
college? How can I obtain a
mission with income equivato that enjoyed in private
fe? How can I be sure of conand the bung to work in my present
anch of medicine? How can I
am my practice back when I ream mome after the war?

The answer to most of these ustions is: You can't. To mainin a \$15,000 home, a \$50,000 high insurance program, and a uple of youngsters in college—
to the pay of a first lieutenant captain—would take a Houdini the very least.

Those who choose to see the ight spots in the dark will find fort in the fact that at least ential needs at home will be on care of. No medical offitamily in this country need in having to go without food, thing, or shelter. Which is more

than can be said in some other countries.

A colleague we talked with recently philosophized thus:

"I've enlisted in the navy. I'll probably lose my shirt. But at least I'll keep my freedom and self-respect."

黎

Whatever the medical brotherhood may lack in glamour (night club society is sadly deficient in practitioners of the healing arts, and doctors rarely crash the Peeping-Tom columns), they can certainly not be denied their share of the sterner virtues. It is not only in the operating room and at the sick-bed that courage and perseverance are called for. We nominate herewith for the Roster of Heroes, second class, the following physicians from the 1940 American Medical Directory, who, by wearing their names, have displayed conspicuous gallantry far beyond the mere call of duty:

Dr. Thomas Gooch Tickle, Dr. F. W. Splint, Dr. Don Mask, Dr. Max Needleman, Dr. John B. Slicer, Dr. Ralph G. Cutright, Dr. Isadore Gash, Dr. Archie W.



THAT'S HOW MUCH FASTER YOU CAN TAKE ACCURATE READINGS WITH THE NEW

Tycos Hook-type Cuff!

Come on! Enjoy new speed, new accuracy; do away with the fuss and fumbling of old-fashioned blood-pressure equipment.

Using the 1942 Certified Tycos Aneroid with the new, exclusive hook-type cuff, you circle the arm just once. The cuff hooks into position in a jiffy, and fits perfectly the first time. You're sure of consistently accurate measurements, because you get uniform compression over the entire cuff width. Taylor Instrument Companies, Rochester, N. Y.



· Cuff alone. rubber without bag . . \$3.75

· New Improved Tycos Aneroid, complete new hook - type and 10-year triple guarantee. \$29.50

TURN TO Lycos 34 YEARS A LEADER Butcher, Dr. H. E. Killam, D. Slav, Dr. D. T. Boozer (with cial citation for the initials). for a chair in the hall of far (appropriately lopsided). Dorothy Sidebottom.



James Bryan (see page 45) an idea.

If every medical society. matter how small, would appr a committee to interpret profes sional policy and answer media questions for the local press, ery doctor in the commun would benefit. The frequent N Th with which the profession and practitioners find themselve compromised because some porter or editor has gotten of the wrong foot is too well know pecific n to need reiterating.

Even a one-man medical formation bureau, given suffici Rich in local scope and authority, on obviate this difficulty almost or night.



Such a generally efficient job been done in organizing en gency medical services for di ian defense that it is to be hop a current weakness of manys services will soon be overcome

We refer to the common fall to hold enough practice di Also to the fact that in m cases no drills are held at all

This shortcoming is explain in part by the recent origin some of the services and still incomplete organization he inte

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the intensified metabolic processes of of Chile periods increase the need for most kun pecific nutrients and for calories. But the utient afflicted with an infectious process cal stally finds it difficult to consume the ffice equired amounts of food.

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Rich in many food essentials, New Imroved Ovaltine is an effective means of st ore olstering depleted carbohydrate, proin, mineral, and vitamin stores. This elicious food drink appeals to virtually patients, thus helps with the problem maintaining the nutritional state. Its sy digestibility and its freedom from r ci brous residue make Ovaltine especially

valuable, even in the presence of gastrointestinal derangements.

mproved Ovaltine provide Dry Ovaltine		Ovaltine	
PROTEIN	. 6.00 Gm.	31.20 Gm	
CARBOHYDRAT	E 30.00 Gm.	66.00 Gm	
FAT	. 3.15 Gm.	31.95 Gm	
CALCIUM	. 0.25 Gm.	1.05 Gm	
PHOSPHORUS	. 0.25 Gm.	0.903 Gm	
IRON	. 10.5 mg.	11.9 mg	
COPPER	. 0.5 mg.	0.5 mg	
VITAMIN A . 1	500 U.S.P.U.	2953 U.S.P.U	
VITAMIN D .	405 U.S.P.U.	432 U.S.P.U	
VITAMIN B1	170 U.S.P.U.	302 U.S.P.U	
RIBOFLAVIN	, 0.25 mg.	1.28 mg	



KINDS - PLAIN AND CHOCOLATE Ovaltine now comes in 2 forms-plain, and sweet chocolate flavored. Serving for serving, they are virtually identical in nutritional value.

Physicians are invited to send for individual servings of New Improved Ovaltine. The Wander Company, 360 North Michigan Avenue, Chicago, Illinois.

may also be explained to a degree by fear of criticism should a drill be unsuccessful. Already, rehearsals in several cities have been derided by bystanders who haven't the guts to go to work and risk mistakes themselves but who are ready and eager to criticize the efforts of others.

Whatever the reason for lack of sufficient practice drills, the fact remains that they cannot be neglected if an organization is to be developed that will function properly in case of actual enemy attack. It's trite but true that there's no substitute for experience. And that goes double where civilian medical defense is concerned.



In a world wallowing amid the categorical realities of the slaughter house, it is heartening that less momentous concerns still agitate the mind of man. A case in point is the periodic rebirth of the controversy over medical symbols: Shall habit-bound old timers (including the U.S. Army) continue in their use of the twosnaked Caduceus; or shall the be a universal return to the gitimate staff and snake of Aess lapius, the god of healing?

PRIOR

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Were it not for the naturals spect we accord to things an and enduring, we might well place the mythological symbol with some emblem closer to a ality. Even then, what would want choose? The cardiologist wo suggest the human heart as representation of both the of life and the compassion of physician. The obstetrician mig like the figure of a gowned of sician, the life giver, holdingald heels up, a newborn babe. I surgeon, needless to say, won hold out for the tools of his spell P cialty.

When all is said, perhaps the one symbol most truly represe tative of the many phases of mo ern medicine is the hypodemi syringe and needle. Yet this bring us back again to the snake, who fang was the first of all hym dermics.

And the staff? The temptation is to replace it with the steem wheel: but that, too, in the lim

GOOD BILLHEADS VALUABLE ASSET



Some billheads seem to shriek "Hey! this is how much you owe me and it's a damn nuisance to remind you about it. Send the dough—quick!" If you feel that way about it you should collect cash and send no bills. Or, we can show you dozens of nice, dignified, inexpensive billhead that bring home the bacon. Free samples and all details

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Searle Council-Accepted Products of Research Include the Following:

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he pioneer American product. Valuable bronchial asthma, Cheyne-Stokes res-ration, paroxysmal dyspnea.

erie Bismuth Sodium Tartrate eenn

e light later-soluble antisyphilitic; useful in all ages of syphilis.

erle Sodium Morrhuate (with Bezzyl Alcehel) lerosing solution for varicose veins.

Searle Procaine Borate with Epinephrine-

Prompt-acting infiltration anesthetic, slightly alkaline and readily soluble.

Searle Gold Sodium Thiosulfate with Sodium Thiosulfate —

Ready for immediate use-in stable, buffered ampul solution.

G.D. SEARLE & CO.

Ethical Pharmaceuticals Since 1888 CHICAGO Kansas City

New York

San Francisco





 Glyco-Thymoline helps to cleanse, soothe and heal irritated and inflamed mucous membrane, and temporarily reduce disagreeable odor of leucorrheal discharge. It also aids in the control of annoying pruritus.

KRESS & OWEN COMPANY 361-363 Pearl Street, New York of recent development, had leter be left unchanged.



When better arguments are for for socialized medicine, the ministration will find them latest discovery is that a sym of Federal medicine would mate the danger of inflation.

How? By necessitating pandeductions to finance it. We would thus curb purchasing page.

In short, socialized medic would help forestall inflate Therefore, medicine should socialized.

It might be observed, of contact "Robbing a bank would mus rich. Ergo, we should mus bank." But only the chur would draw such a rude para

The transfusion of excess p lic purchasing power into the cial Security System has been mitted to so uncomplaining the donor, John Public, that Roosevelt's hope for a vast pansion of the system is not be wondered at. Certainly prospect of raising \$5,000, 000 more a year for the Tres and of gathering 27,000,000 people into the happy family ated by the system could not be overlooked by a politic astute Chief Executive. Social medicine would be a major in the expansion of Social curity; and, from a White Ho point of view, the argument it would help stave off into is a natural.

What therapeutic aims in hemorrhoids?

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- O Anesthesia of the exposed nerves.
- Hemostasis of the bleeding veins.
- Decongestion of the varicosities.

Physicians meet these indications with RECTAL MEDICONE, plus regulation of the patient's habits to secure subsidence and quiescence of the process.

RECTAL MEDICONE contains 5% Anesthesin to effect prompt relief from pain. It is fortified with Ephedrine Hydrochloride to stop the bleeding and modern anti-hemorrhoidal agents required to secure retrogression and resolution.

The wide and constantly growing employment of RECTAL MEDICONE attests most eloquently to the foremost place which it has attained in its field.

MEDICONE COMPANY

STOPS
HEMORRHOIDAL
PAIN
WITHIN
5 MINUTES



RECTAL-MEDICONE

DRAMATIC EVIDENCE of the unusually rapid activ

in the treatment SKIN CONDITION

Fo



Suffered eczema one year MAZON brought

satisfactory rel IN 10 DA

The patient in this case study had tried many skin preparations through an entire year of eczema suffering, without obtaining noticeable results. Yet, incredible as it may seem, 10 days after treatment with MAZON, the condition had cleared.

MAZON is indicated for the relief of externally caused Eczema. Psoriasis, Alopecia, Ringworm, Dandruff, Athlete's Foot and other skin disorders.



PHOTOGRAPHED FEB. 13, 1942 We couldn't offer you more suasive reason than an esta like this, for trying wherever it is indicated.

Perhaps you have several cases right now which MAZON can help.

We will gladly send you test samples without cost.

BELMONT LABORATORIES CO., 4430 Chestnut St., Philadelphia

CEREALS

JU

For taste variety, and for certain cases of allergy, Gerber's offers:



tie

... a wheat cereal

Gerber's Cereal Food is a bland, easily digested cereal with a base of wheat and wheat germ. Extreme palatability is a feature of this special baby's cereal. Low in fibre, high in Vitamin B1 and Iron.



a wheat-free cereal

Gerber's Strained Oatmeal offers the nourishment value of whole oatmeal. It is ready to serve with the addition of hot or cold milk or formula. This cereal again is highly palatable, high in Vitamin B, and low in fibre.

by the makers of

ierber's Baby Foods

REALS . STRAINED FOODS

JUNIOR FOODS

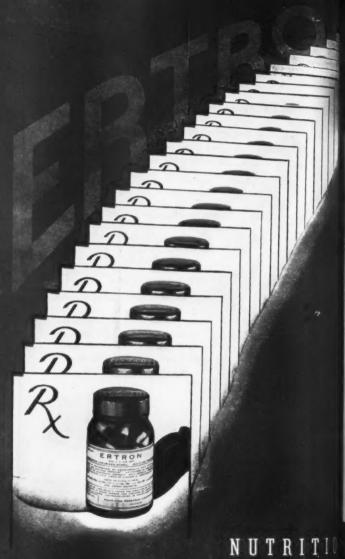


GERBER PRODUCTS CO. Dept. 225. Fremont. Mich. Gentlemen:

Kindly send me complimentary samples of the two cereals mentioned above. Also Professional Reference Cards showing the food analyses.

ADDRESS

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Wowr ACCEPTANCE HAS MADE POSSIBLE

1/3 Reduction in the Price of ERTRON

Reg. U. S. Pat. Off.

Now, more arthritis patients can receive the benefits of ERTRON therapy. The wide and successful use of ERTRON by the profession has made this possible.

With ERTRON being prescribed in ever-increasing quantities, a new, modern laboratory has been constructed, production costs have been reduced, and we give your patients this great saving.

The new retail prescription price of ERTRON is \$8.00 for 100 capsules and \$4.50 for 50. Each capsule contains 50,000 Units of high potency, activated, vaporized sterol (Whittier Process).

Why ERTRON Is The Treatment of Choice in Arthritis

cinically controlled—The beneficial results obtained with ERTRON in the treatment of arthritis in the original research, led to the extensive employment of ERTRON and have been repeated in numerous experimental and clinical studies.

INIFICIAL RESULTS—Competent research leaders in leading hospitals and arthritis clinics have reported favorably in large numbers of controlled cases. Observations on private practice patients have also appeared in the literature, with equally gratifying findings.

SAFETY—ERTRON is comparatively non-toxic. At a point above the ideal maintenance level, symptoms of overdosage may appear. These include nausea, vomiting, frequency of urination, nocturia. They promptly disappear on reduction of the dosage. The drug may be administered over prolonged periods without ill effects.

THE ONLY PRODUCT—There is no product which is identical with ERTRON. It is the only high potency, activated, vaporized sterol (Whittier Process). There is no reason to assume that the same effectiveness plus safety can be obtained with a "similar" product. The eight-year clinical background of ERTRON separates it from the substitutes.

ERTRON is made only in the distinctive two-color gelatin capsule.

Products of Nutrition Research Laboratories are promoted only through the medical profession.

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Normal Peristalsis

Is Effectively Promoted by the Bland, Non-Irritating, Non-Digestible Bulk to be

Mucilose



This highly purified hemicellulose is available in 4 ox. and 10 ox. botsles as Mucilose Flakes and Mucilose Granules; and in 4 ox. botsles as Mucilose Granules with Kasagra.

ns & Company Frederick



Since 1855 . . . ESSENTIALS OF THE PHYSICIAN'S ARMAMENTARIUM

NEW YORK WINDSOR, ONTARIO

KANSAS CITY

DETROIT, MICH.

SAN FRANCISCO AUCKLAND, NEW ZEALAND

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SYDNEY, AUSTRALIA

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A "Spare the Doctor" Campaign

iotism need not be limited to things as driving slowly and g one's toothpaste tubes. A re the Doctor" campaign the promoted on similar ands.

w people appreciate how y physicians are being siled off into the armed forces how great an added burden imposes on the doctor who ims at home. Few realize, fore, that continued good ital service depends on helpthe doctor to conserve his

peals to conserve the physistime could be publicized as well as appeals to consoil, rubber, and other esals of war. For example: your house calls in by 9 "Don't ask your doctor to to your home if you can go soffice instead!"

lese messages, if widely deast by medical societies physicians, would achieve results. With each would reminder that the more time doctor can save in traveling his patients the more time ill have to treat them.

Physicians in several States have been asked by MEDICAL ECONOMICS for their opinion of a campaign to produce these results. Without exception, their replies have been enthusiastic.

Most of the accepted publicity media could be employed in putting over a time-conservation program. These include newspaper space (many papers would be glad to report such an activity): advertisements (small but frequent insertions at consequently low cost); public speaking and radio (medical societies often sponsor programs in which suitable publicity could be included); pamphlets and placards to be mailed to patients and placed also in doctors' waiting rooms (best printed under medical society sponsorship).

Perhaps the most effective publicity could be disseminated by the doctor himself in his conversations with patients and by printed notices on his billheads. Medical men who are now doing this report fewer house visits plus a marked tendency among patients to get their calls in early.

-H. SHERIDAN BAKETEL, M.D.

Do We Need a Code of Medical Ethics?

By Frank Riggall, м.ь.

Sins committed by doctors in the name of medical ethics have a profound effect in lowering the profession's prestige in the public mind. Yet there is no need of this if every doctor will strive to live up to a clear idea of ethics.

Philosophically speaking—and ethics is a branch of philosophy—codes of medical ethics are really systems of etiquette, conceived to serve the medical profession while ostensibly serving the public. They fall far short of the ethical ideal because they represent something imposed on doctors from without, whereas the true ethical ideal is something which stems from within.

It was knowledge of this which guided a famous professor of pathology when he was asked to serve on a committee engaged in drawing up an ethical code. He declined the invitation, remarking that "if a doctor were a gentleman, he did not need a code of ethics; and if he weren't, no code would make him act like one."

What is this ethical ideal? After an exhaustive analysis, the philosopher Kant reduced it to

the categorical imperative, act as if the maxim of thy act were to become by thy will universal law of nature." We of course is only a careful statement of the golden rule.

Codes of medical ethis because they are too narm overcome the ego and selfish of individual doctors, and beat they do not place the interest the patient first. If any do does not believe the laster pulet him reread his code and sider how it must seem to a man.

As far as selfishness is cerned, medicine is neces an egotistical profession. Med authors write because they they have something new to scribe or because they think! can state their points better those who have gone before Dr. Brown thought that Dr. St could treat Mrs. Jones better he could, he would in strict sonal honesty feel it necessary send her to Smith. When the makes us study and try alway do our best, it is a useful vant; when it gets out of har

t become The old at consult doctoring; and better. p patient a patient justified as the

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become a dangerous master. the old idea that when a pateonsults a doctor he becomes doctor's private property is ng; and the quicker it expires hetter. We are not entitled to patients we cannot satisfy. patient is dissatisfied, he is instified in changing his docas the doctor is in changing brand of cigarettes. It is ilinating to read dissertations the patients' right to free ice of doctor, and then to hear physician inconsistently wax th when a prized patient goes ewhere.

Most patients change doctors cause they do not get satisfacninservice or personality. Perps some of them cannot have ifaction—but they can't be med for trying to find it. Inad, when a patient leaves him, doctor should try to discover the failed. If he gave the at that medical science could be more.

but if he failed to give the storfailed to send the patient methe best could be obtained, manerror was committed from the a lesson can be learned. The dicine, like life, is often a commisse between what is best and the patients; though it's well metall what Lord Moynihan and his patients: "My second to store a learned."

who well the implications.

we mean that doctors should
thoroughly at home with sci-

entific advances; that they should be so familiar with the basic principles of anatomy, physiology, and pathology as to be able to separate the small amount of wheat from the chaff which constantly appears in medical literature. The rudiments learned during school, are alone, not enough!

Perhaps you say: "Giving one's best and acting on the golden rule is fine—but what's to be done about the other fellow who lacks such ethical compunctions?"

The question is germane, but easily answered: Let his own conscience deal with him; you have enough to do to look after your own. At the worst your behavior will heap coals of fire upon his head. At best you may set him an example from which he may learn. To attempt to give him a dose of his own medicine is often fatal; remember Gladstone's remark that "Snakes are immune to their own venom."

Do not forget either that the golden rule includes good manners, the lack of which may be seen between doctors to a shocking extent. When a patient is referred to you, acknowledge the referral as soon as possible and keep the referring doctor informed of the patient's progress. Do your best to send the patient back to the referring doctor when your treatment is concluded. When consulted by a new patient, do not hesitate to ask his previous doctor for information. If a patient leaves you, do not be so small as to withhold information from his new doctor. Remember that the patient's interests come first.

The charge that codes of medical ethics are used for the benefit of doctors and not patients is a grave one-but easily proved. Read the code of ethics on medical consultations and ask yourself if anything more closely resembling a compendium of medieval sorcery is to be seen in this age. The whole mumbo-jumbo is calculated to protect doctors in their errors of omission or commission, rather than to further the patient's interest. The patient may pay for a free and independent opinion, but he rarely gets it in those cases in which the consultant deems it his duty to protect the attending physician from criticism. The consultant's first duty, it would appear nowadays, is not to the patient but to the doctor in charge-instead of exactly the reverse.

The public does not expect us

A California doc-Package tor employs a Depository practical means by

which patients can pick up or leave specimens, medicines, small packages, and messages after office hours. The device which makes this possible is a combination letter box and package receptacle built into his office door. The box is accessible from both sides of the door and its contents can be seen through a small glass panel set into its inner side.

to be infallible, even though medical profession seems to the it must maintain an atmosn of infallibility. The public pects us only to do our bed our best does not satisfy, or do not do our best, then wen pay the penalty of losing the tient.

For an example of w wrong with medical ethics, sider the fact that codes usu in the stipulate that an "irregular m hour, t titioner" shall not be met in sultation. Such a practitioners Murph have the patient's utmost and confidence. In essence, into a stipulation means that media There refuses to dispense its bene around unless such faith and confiden be given up. about

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If medicine has the interest deliver patients at heart, it will give this mo benefits to anyone, instead live de passing by like the Levite the other side. There is always chance that a patient may be to discr lieved of suffering or that a may be saved, whatever the fession regularity" of a doctor in thea There is always a chance of ing up to that section of the pocratic Oath which says one shall teach the art.

Medicine is not a proud haughty goddess who glances to misu scorn at humans who do and the please her. Medicine's motto "Nothing that is human is eign to me." It is for sent rendered, and for services that the laborer is worthy of hire.

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44

A Formula to Better Our Press Relations

By

James E. Bryan

In the middle of a busy office hour, the telephone rings.

"Hello, Dr. Brown, this is Bob Murphy of the Eagle-Dispatch." The doctor's affable smile fades into an apprehensive frown. There are signs of quick freezing around the edges.

"We want to ask two questions about those Billings babies you delivered at Memorial Hospital this morning. First, is it true that live delivery of both twins in a

Mr. Bryan is especially qualified to discuss the sometimes imperfect relationship existing between profession and press. Reason is that he is executive secretary of the Westchester (N.Y.) county medical society, an organization that has been among the pioneers in devising a workable, effective medical information service. Here he describes both the conditions which give rise misunderstandings with the press, and the mechanism by which these unecessary and harmful frictions can be avoided. His article should have particular applicability for members of small and medium-sized societies throughout the country.

case of twin prematures is very rare? And second—"

"I'm sorry, Murphy, I'd rather not comment," interrupts Dr. Brown. "I don't wish any publicity."

"Of course not, Doctor," Murphy explains. "But Mrs. Billings is well known around Crestville, and we understand her case is pretty unusual. It's our job to cover the news and to get it straight. We won't quote you directly, but can't you just tell us whether this story is as big as we think it is?"

"I'd rather not comment," says Dr. Brown, wearily. Then his voice rises: "Do you want to get me in trouble with the county medical society?"

"Okay, Doctor, okay. Sorry I bothered you."

The conversation ends.

Next day the story is out, with the sensational aspects played up absurdly. Result: the doctor is in the clear; the public is misinformed; and the profession's press relations are thrown for a loss. Multiply this scene a thousandfold, and [Continued on page 118]



Once You're in the Army any, all

Economic advantage is hardly the motivating factor which will bring new thousands of physicians into the armed forces this year. More often than not, income and peacetime comforts are willingly sacrificed.

An understanding of army economics is essential if the prospective medical officer is to minimize the difficulties of this adjustment. The data presented be low are aimed at filling this practical need. Here are facts on promotions, base pay, foreign serice, insurance, allowances frod, rent, uniforms, and travel and related questions.

DURATION OF COMMISSION
All new physician-appointments to commissioned rank and

made in the Medical Corps, A

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GRAD

The a



facts you will need to know—about travel,
wy, allowances, promotions, uniforms, etc.

The by of the United States, and are or the duration of the war plus in months. The A.U.S. includes be so-called Selective Service aring as well as the regular U.S. this mobilized to fight a war and rases to exist six months after our ends.

The army's chief requirement

is for physicians under 37, to be appointed in the grades of first lieutenant and captain. Appointments above the grade of captain will be made from the age group 37-55, but only in case vacancies exist which cannot be filled by promotion of qualified men already on duty.

It is emphasized that practically no civilian training qualifies a doctor to assume in full the responsibilities of an officer serving with field forces or in other non-hospital capacities. Therefore appointments for this type of service—and they will be in the majority—must with few exceptions be made in the grade of lieutenant.

Physicians assigned to hospital units must normally have had special training and experience. Specialists and partial specialists are graded Class I, II, III, and IV, according to the degree of responsibility they are deemed capable of discharging. Both older men and men under 37 may be appointed as captains (Class III)

if their qualifications are of hospitals type attested to by specials board certification, or by men opportunities of Surgeons, the American College of Surgeons, the American College of Physicians, or a national ears in ly recognized specialist society of the their type of the special special

Incidentally, no rotation of positive as sonnel between field forces as a numerous

PAY and ALLOWANCES of ARMY OFFICERS

	Monthly Allowances With Dep. No. Dep.			Annual Base Pay and Allowances (R.&S.)			
Grade	Monthly Base Pay	R.	S.	R.	S.	With Dep.	,
Col.	\$333.33	\$120	\$36	\$80	\$18	\$5,871.96	\$5,175.96
Lt. Col.	291.67	120	54	80	18	5,588.04	4,676.04
Major	250.00	100	54	60	18	4,848.00	3,936.00
Capt.	200.00	80	36	60	18	3,792.00	3,336.00
1st Lt.	166.67	60	36	40	18	3,152.04	2,696.04

Dep.=Dependents. R.=Rent. S.=Subsistence.

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PROMOTION

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the aly one grade at a time, and onrate in the case of a specific vacaninsel calling for a higher ranking
ficer. With the rapid expansion
its the army, such vacancies will
an enumerous in the intermediate
rades, less common in the highgrades. As a guide, the War
epartment assumes that an ofter should fill a position calling
radvanced grade for six months
fore being promoted to fill that
defined as a specific vacancy.

PAY AND ALLOWANCES

Accompanying this article is a part showing the pay and alwances of officers in grades from at lieutenant through colonel. It this writing, increased allowates (though without changes base pay) are reported to be ader consideration by the Sente Military Affairs Committee. It should be clearly understood at (with two exceptions) the limber of dependents is not takninto consideration in the payent of allowances. For exame, a married lieutenant with no bildren is entitled to his base

¶ MEDICAL ECONOMICS is again indebted to medical corps officers in Washington and at the Medical Field Service School in Carlisle, Pa., for their cooperation in furnishing material for this information digest. A previous article ("If You're Joining the Colors. . .," April M.E.) discussed the practical aspects of winding up professional and domestic affairs prior to induction.

pay plus \$60 a month for rent and \$36 (or two \$18 rations) for subsistence. The married lieutenant with children—regardless of their number—receives identical amounts.

Exceptions are the grades of major and lieutenant colonel, in which officers are entitled to a triple (or \$54) monthly subsistence allowance. Upon attaining the rank of colonel, the officer again collects only the \$36 subsistence payment.

If the officer supports his mother, she is of course recognized by the army as a dependent.

If the army provides quarters for the single officer, or for an officer and his family, no rent allowance is paid. The prescribed amount is merely omitted from his monthly pay-check. However, army quarters are available for only a very small percentage of married men. Officers who must live in other than army quarters are given the full rental allowance to which they are entitled by rank.

[Turn the page]

At all but a few army stations, an officers' mess is conducted. Cost is pro-rated, and usually comes to about \$30 a month for each participating officer, or \$12 more than a single food allowance. When the officer eats with troops, the \$18 covers the exact monthly cost.

Married officers are not required to take meals at the post except during periodic tours of duty which necessitate their constant presence there.

FOREIGN SERVICE

Congress has just passed a bill granting a 10 per cent increase in the base pay of officers while serving outside the continental United States and Alaska, or while on sea duty. The Office of Government Reports, in its daily information digest, says: "The bill also provides for allotment of pay for one year to dependents of members of the armed forces who are captured by the enemy, or who are missing."

When an officer with dependents is assigned to foreign duty, or to duty in a Theatre of Operations within the U.S. or Alaska where his family may not accompany him, he continues to receive his usual rent and subsistence allowances.

In these circumstances he receives his quarters with the troops without cost, but out of his subsistence allowance he must pay his own subsistence expenses. His rent allowance and the balance of his subsistence allowance may go to the support of his dependents.

THREE YEAR PAY INCREASS. For every three years' sens a 5 per cent increase in base p is awarded to officers. Amount the increase is computed on basis of rate of pay received the time the three years' sens is completed.

TRAVEL ALLOWANCES, ET.
The officer ordered to att duty may have his household fects, within specified weightling its varying with his rank, shipper from his home to his first stat at Government expense. He reimbursed at the rate of 8 cm per mile for his personal travel of dependents.

Permanent change of statis while on active duty includes provision for the moving of how hold effects plus transportation allowance for the officer and, varying and lesser rates, for the officer's dependents.

On temporary change of st tion, the officer receives the trael allowance for himself only, an is compensated for transportation of a limited amount of baggage

The standard travel allowand of 8 cents a mile is paid according to distance computed on the shortest usually-traveledroul in cases where the officer go by train or plane. If he goes b car, the mileage allowed is either the rail distance between the two points, or the shortest highward distance—whichever is less. No a bid of little of the shortest highward distance—whichever is less. No a bid of little of the shortest highward distance—whichever is less. No a bid of little of the shortest highward distance—whichever is less. No a bid of little of the shortest highward distance—whichever is less. No a bid of little of the shortest highward distance—whichever is less. No a bid of little of the shortest highward distance—whichever is less.



Litter bearers and other enlisted men in the medical corps are taught and led by we described of leadership rarely required in private practice.

lowance is granted on occasions where an officer travels with

troops.

The officer making a permanent change of station may ship household effects and other personal property at Federal expense. Maximum gross weights allowable for officers of the various grades are: first lieutenant, 7,500 pounds; captain, pounds; major and lieutenant colonel, 9,500 pounds; colonel, 11,000 pounds. Over and above these allowances, professional books and papers may be shipped without restriction as to their

On temporary change of station, officers are entitled to the following allowances for baggage: lieutenants, 200 pounds; captains, 300 pounds; major and lieutenant colonel, 400 pounds; colonel, 600

pounds.

UNIFORMS

Newly passed by Congress and now in force is a law authorizing payment of a \$150 uniform and equipment allowance to new army officers below the grade of major. The officer is awarded this payment after he is in service.

It is not expected that \$150 will pay for all uniform costs. It's about enough to cover the absolute minimum outfit needed in the beginning. The officer must have both Summer and Winter uniforms, and he'll hardly be content with only one or two changes of dress, no matter what the season. It would be wise to figure

on spending \$225 to \$300 form forms and equipment during first year's service. If ordered duty in, say, the Orient, the cer would have to buy still of uniform essentials.

As reported in MEDICAL E NOMICS last month, best way buy uniforms without going needless expense is to get to can early and purchase them from post exchange or the quark master stationed there. Seen the grobest is to write the camp's on alled i manding officer for a list of min test the mum uniform requirements; the sho re buy only enough to enable weaks to report in uniform, leaving the excomplete wardrobe until you on the buy it at the post. Buying uniforms from the new military of the sply stores which have popped to Lack overnight in many cities wourp a prove unsatisfactory. If you must her buy uniforms before getting at But camp, patronize the old-est werloo lished supply houses. In an the next event, prices charged by civilinatic vectors, prices charged by civilinatic vectors invariably are higher the sples it those set by the post exchange It is a or quartermasters. post exchange or the quarte

or quartermasters.

SERVICE LIFE INSURANCE
National Service Life Insurant dvanta
may be purchased by all men reet e
bers of the armed forces on the offi
tive duty. It is available in a story multiple of \$500, within a \$1.00 sist sh minimum and \$10,000 maximum oppoint The insurance is issued on The

nally in the form of 5-year lent reception premium term, and within 1 to y desi years it may be converted to a lelayer

[Continued on page 116 while a

Is Your Secretary on the Spot?

When poorly placed, a secretary's desk is an office bottleneck. Here are practical hints on where it may be put.



com he growing number of doctors on alled into the services accentuminates the need, among physicians in the remain at home, for new express to streamline office routine. ngth mexceedingly important factor but not the smooth flow of patients 3 whough an office is the location

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you of the secretary's desk.

ed Lack of space or the layout of
mourparticular office may not permuch ther desk to be ideally locatng td. But to make sure you haven't established a possibility, turn to the next two pages for a schethe tiples involved.

and it is almost an essential of good

It is almost an essential of good affic flow to have your office in ear the main entrance. The rame dvantages are many. She can men uset each patient as he enters in a he office; she can look up his a sistory at once; and after the sit she can make a subsequent upontment or collect the fee.

Out The location of her desk in the less teeption room, however, is rarely desirable. Her work may be to out the state of the st

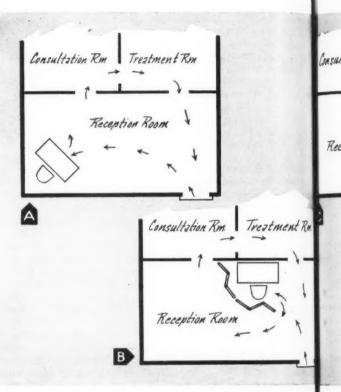
to or klayed by overtalkative patients, all while a noisy telephone and type-

writer can irritate nervous patients. A more serious disadvantage is the fact that she has no privacy for discussing payments.

If she must be placed in the waiting room, her desk can at least be hidden by a decorative screen or two. Curtains suspended from rods offer another solution: a semi-permanent partition may be even better.

Usually, a better spot for the secretary's desk is in the fover or main corridor. Here she can discuss fees with patients in some privacy. The occasional patient whose cough or bandage makes him less welcome in the reception room may be escorted directly to an inner office. She is also strategically placed to speak with departing patients.

If traffic through an office flows in one door and out another, the secretary's desk should ideally command a view of both doors. If this is impossible, it's wise to consider sacrificing the advantage of the additional exit for the advantage of having the secretary see all patients as they leave.



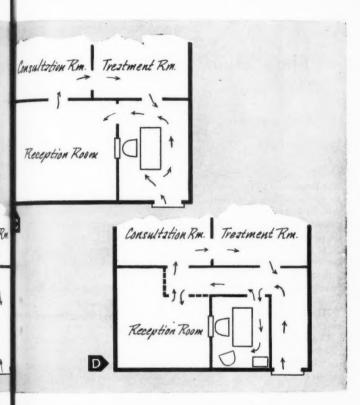
A This sketch shows poor placement of a secretary's desk. Patients have no privacy in which to discuss fees. They may be irritated by the noise of phone and typewriter. The secretary is inconveniently far from other rooms, subject to interruptions, and poorly placed when patient leaves.

B Though not ideal, this is a low-cost way to improve on A. Secretary has a semblance of priday. W vacy, is nearer to doctor, and a patient better able to speak with patient her no as they enter and depart.

C A still better solution is a part and ph tition placed to form a corrido partition through which patients pass of view of entering and leaving. The fat that the secretary's desk is not a D Pro from consultation and treatment arrange rooms saves her many steps a privi

privac

with p



fpr day. When she's at her desk, no not patient can come or go without ient her notice. She also has relative privacy in which to discuss fees with patients as well as to type and phone. A window cut in the rich partition behind her affords a view of the reception room.

oth D Probably the most satisfactory med mangement for the secretary is ps 4 private office. As shown here,

all office traffic passes her door, but she may converse with patients in full privacy. The continuation of partitions (dotted lines) suggests an arrangement with additional advantages: The secretary can then enter consultation room without entering reception room, and the square lines of reception room are broken up in a way that permits a better seating plan.

She's "Mom" to 465 U.S. Flyers

A close-up of Dr. Margaret Chung, who acts as foster-mother and one-woman recruiting office for crack war pilots



Shortly before Hong Kong fell, two American flyers settled next to each other at a bar. They said brusque "hellos." Then one grinned at the tiny, jade Buddha tie-pin on the other.

"Got one, too," he said. He dug his forefinger inside his collar, pulled out a gold chain on which swung a jade brother to the first

Buddha.

"How's Mom?" they both exclaimed at once.

One continued, "Say, I saw her just before I came out. She gave me the once-over and took me out to dinner."

"She's some guy," said the other. "I came out last Spring—had my last dinner in San Francisco with her before we sailed. She wrote me the other day to keep a watch for a new flyer from Peoria headed for Burma."

"Mom" Chung heard about the meeting later, in her red, gold, and green office in San Francisco's Chinatown. The two flyers had escaped to Burma where they met another Buddha-wearer who was headed back to the United States. His first call who he arrived in San Francisco won "Mom" Chung, to whom a gave the details of her two "sons escape from the besieged city,

Margaret Chung is a general practitioner with a special integest in plastic surgery, a lover good living, and "Mom" to a American flyers, most of the now somewhere over the Pacific An American-born Chinese inhelate forties, she is plump, breatly slangy, but not without touch of Chinese dignity. Righnow she can talk of nothing her boys, who are making world-wide name for themselve as "the Phi Beta Kappa of wflyers."

It isn't easy to get one of the jade Buddhas that makes a five a Chung "son." Usually it hap the with pens this way: An "old son" wil Dr. Cl bring in his friend. They will riely a have a meal with Mom and chall frustrator an hour or two. If she decide capab that the new boy is really a five ind. S and a square-shooter besides, he en the gets a Buddha. He gets a number tween ber, too; and Mom will remember ap; given the same that the gets and moments appears to the same that the gets and moments appears to the same that the gets and Moments appears to the same that the gets and Moments appears to the same that the gets and Moments appears to the same that the gets and Moments appears to the same that the gets and Moments appears to the same that the gets and Moments appears to the same that the gets and the same that the



they the with unfailing accuracy.

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plans fun; feeds them; and hears their stories. Her flyers tell of the times she has cabled money to a youngster halfway around the world, and of the times she has popped into a plane on an hour's notice to fly to some hospital where an injured "son" demanded medical attention from Mom and no other. She doesn't own a plane herself, but she has flown them and plans to get one after the war.

In the meantime, she has what is probably one of the most remarkable collections of aeronautical bric-a-brac in the country. It's housed in a room off her office, so jammed that curios are piled knee-high and telegrams are thumb-tacked to the walls all the way up to the ceiling.

Her boys send her most of the mementoes. She has a piece of the plane in which Quentin Roosevelt was killed, a piece of the Hindenburg, a fragment of the plane in which Will Rogers died. She has parts of four famous Pacific Clippers, and an exhaust pipe from the dirigible Macon.

Mom loves to tick off her sons' accomplishments. Commander

Inoculation A North Carolina pediatrician keeps Reminder

a bulletin board in his reception room on which is displayed one of several bright yellow quarantine signs he has obtained from the local health department. At a given time the sign may boldly feature measles, diphtheria, smallpox, or typhoid fever. A parent bringing a child in is usually startled by the notice on the board, and may look hesitantly at the doctor to see if the disease has claimed him. Questions prompted by the sign are seldom disposed of until the child is scheduled to have needed inoculations.

Cunningham, who distinguish himself on Wake Island, is a 348. Captain Robert Flood w flew a clipper around the wor when war caught it in the F East, is another. Pilot Robe Mannix, fighting over Britain wi the American Eagle Squadron still another.

Dr. Chung's vicarious mothe hood started in 1931 when the Americans dropped into her fice to ask help in joining t Chinese air force. She tried help them-and failed. Now sh making up for lost time.

Twice she tried to enlist inf Chinese army's medical con Instea but both the American and (have for nese foreign offices turned thum rchasir down-on the grounds that s was performing a more valuate he auth service in San Francisco. So no recouns she satisfies herself by function the St ing as a one-woman recruitive advice office. From all over the countries and-h young men who have heard about ured o her make their way to San Fra through cisco and phone Mom for help mell U is the getting into some flying unit. h books

Dr. Chung is more brisk th sentimental when she thinks start a has found a promising new by She writes out a note, hands it do for her visitor, says:

"Here, take this to General! s whiel and-So. Tell him Mom sent w es to p Tell him you're under age that I say it needn't matter. Brill one me back seven Jap scalps. seven for yourself. Good la Let me hear from you."

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Instead of Buying an Annuity

Bion H. Francis discusses this and ten other important insurance problems



guillowing publication of the ared le, "Planning for Retirement" / streeting MEDICAL ECONOMICS), received this inquiry from a intimeter:

The last of buying an annuity, and the last nine years been are rhasing American Tel. & Tel.

he author is an accredited insur-^{0 10} accounselor, having been licensed nction the State of Massachusetts to ruitive advice on both life and accioutsut and health insurance. He has abouted or given courses on insur-Frate throughout Massachusetts, at nelp mell University, and elsewhere. is the author or co-author of nit. Is the author or co-author of books as "Life Insurance from k the Buyer's Print of View" "House Buyer's Point of View," "How ks Start a Life Insurance Program," why MEDICAL ECONOMICS will be ds it d to forward to Mr. Francis for wany general insurance quesrals which are of common interest nt whysicians and which lend themge les to publication. Please submit . Brit one question per letter and whatever facts may be necess. (to an intelligent reply (e.g., 1 lu income, number of dependents, and amount of insurance, etc.). ID AR

stock. I figure I'll receive more income from the capital invested and it will be just as safe. What's more, after my death, the income will continue. Have you any criticism of this plan?"

I have. And since I know a good many other physicians are also addicted to this type of retirement scheme, a few words about it here may well be in order.

In general, I would not advise anyone to base a retirement income on the stock of a single company or on the stocks of companies in a single industry. Not long ago, I had the task of trying to salvage the retirement program of a man who had planned his program around 2,000 shares of bank stock. The stock had been bought at more than \$100 a share, but was selling then for \$8 a share!

I'll admit that this is an extreme example, but the securities of even strongly entrenched companies are sometimes subject to radical fluctuation over periods of years. [Turn the page]

When you get ready to retire. you don't want to have to recoun speculative losses. For this reason, I make the following suggestion:

Diversify your funds so that a decline in a single security may not jeopardize your whole retirement program.

"But what could happen to American Tel. & Tel.?" you may ask. "It has been paying \$9 a share for years." My answer is

simply this:

No matter how long the dividend record has been maintained in the past, there is no guarantee that it will be maintained in the future. For example, if we have a severe inflation (and some inflation seems inevitable) this company, like many others, may be squeezed badly between rising labor and material costs and taxes on the one side, and fixed rates that can be adjusted but slowly on the other side. I'm not saying that this will happen. But it is at least a possibility and therefore merits consideration. In my opinion, there is no exception to the rule that funds held for retirement should be diversified.

... Several other MEDICAL ECO-NOMICS readers have submitted questions to me lately in which I believe physicians generally would be interested. Here they are, accompanied by my replies:

SAVINGS & LOAN

Apropos of your recent article on "Inflation vs. Insurance," I should like to ask whether money in a Federal savings and loan a paring sociation represents a fixed-dolly. The value. Is money in such an instruct tution a safeguard against influenticipy. tion?

rofits. tion? The answers to your two que sult for tions are, respectively, yes an lity, (2 no. An investment in a Federa rest easings and loan association don quense have a fixed-dollar value. Sur on lap an investment should therefore s. The not be considered a safeguar turn of against inflation. This does no 90 upon mean that the investment is un zond, sound, but simply that the do remium lars which will be returned as of a you later may then have less pured a chasing power than they have the what day. contr

day. The only types of investment inced to

that can be expected to prote is insu purchasing power are real estat romise commodities, common stock Policie and the like. To obtain a professare however, you must run the many abl of a loss. For this reason, despitegree of the possibility of further inflationselling it is unwise to place all you mided. funds in stocks, real estate, an Althou commodities. Some of your cap is comtal should be retained in such are its strictly investment holdings would bonds and savings accounts (you the essavings and loan shares are safewision

factory for this latter purpose ting I

PROFIT-SHARING POLICIES Impany
I was visited recently by an increasing surance agent who told me the hidend his company was expanding in phits d my State and that, in order purces v secure good will, it was offeri INSUR several business and profession lam 3. men of each community a profile 1 in a paring life insurance policy.

lole The unusual thing about this instruct is that it provides for influstricipation in the company's rofits. These profits are said to que sult from (1) savings from morque sult from (1) savings from morina lity, (2) savings from excess inden rest earnings, (3) savings from
iden pense margins, and (4) savings
Sus om lapsed or surrendered polieier is. The company guarantees a
guar turn of \$75, \$62.50, \$62.50, and
is of you proper in full of the
is of the miums, respectively, regarded to of whether the policy had
is pur uned any profit or not.

vet What do you think of this type
i contract? I'm still not con-

contract? I'm still not conmen inced that I'm worth enough to rote in insurance company for it to stall numise to cut me in on its profits. tock Policies promoted in this way profit rarely worth buying. A com-er in wable to offer the necessary espit gree of security seldom resorts ation selling methods of the type de-your bed.

cap a company's willingness to sud are its profits, there is nothing gs: usual about this. Profit-sharing (you the essence of the dividend sationision in all standard particiose ting policies. Every mutual mpany, after setting aside its and wessary reserves, must pay as e the sidends to policy holders all der birces you mention.

am 32 years old. Three years propo I developed tuberculous pleurisy with effusion, which required seventeen months of treatment and convalescence before complete recovery. Present life insurance rates quoted me are about double the ordinary rates. but will get cheaper, I am told, as time proves the unlikeliness of my breaking down again. Should I tru to obtain more insurance now or wait for lower rates later?

If you need insurance and can secure it, by all means buy it now. Later, if a more favorable rate is obtainable, well and good. Meanwhile, don't go without needed insurance just because of the higher rate currently de-

manded.

GUARANTEED RETURNS

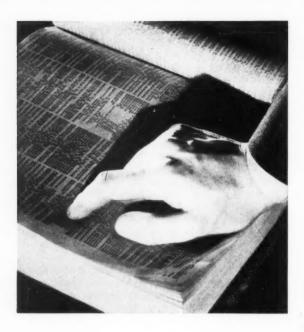
I have been thinking of taking out a \$10,000 retirement income policy. The insurance company says that if I allow the dividends to accumulate until I reach the age of 65, the contract will then be worth \$15,870. How can they guarantee that I will actually get \$15.870 back?

The company does not guarantee that you will receive \$15.870. The cash value of the policy at age 65 is guaranteed, but the accumulated dividends are not.

INCOME-INSURANCE RATIO

I have an average annual gross income of \$9,000. My insurance premiums total about \$1,500 a year. Am I spending too much of my income for insurance?

This is one of the commonest insurance questions asked. After [Continued on page 104]



Saving Time on Your House Calls

Here's the story of a doctor who analyzed his house calls and found nine ways in which to save time, gasoline, and tires.

It's currently estimated that the armed forces w have absorbed a total of more than 30,000 phy cians before this year is out. Facing those of who remain at home is the literally tremendo of a n problem of giving adequate medical attention millions of extra patients. Clearly, it is a burden can carry only by a stepped-up working efficient Here's how carefully planned house calls will a new hours to each day's budget of time.

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sive tires and gasoline as well as k, I map my house calls in a inte sequence. Although an ocinal emergency case may disthe best-laid plan, foresight in ing out a circuit saves much k. The ideal route keeps wasteback-tracking to a minimum, is me from one visit to the next not one.

2

when to make morning or aftern calls is a matter of personal ivence; I make afternoon rounds a I can then let calls accumulate plan my circuit better. Though may sometimes be a slight inunience to patients, I don't hesito drop in at times when they the eating or napping.

3

wretary doesn't try to phone a route except in emergencies. I wimpler for me to call back of my hour or so than to have her more a half-dozen homes to tell ion of a new house call requested. The man urgent case requires it, of ies two, she can usually reach me my of my planned calls.









or as po On week-ends and at night, at re my l phone-answering service substitute tal. Me for my secretary. The operator early, ar a list of places where she can an "Telep ably reach me; and I keep the u If phon ice informed of expected change it will in my off-hour habits. The few n usual lars a month it costs are worthul the hos to free my family from phoneering duties.

5

topped If I have difficulty in finding as tient's home, I don't waste to efewer driving around. Instead I look to But policeman and ask him the w is to at Taxi drivers and gas station I cons tendants also know their neighb wh to co hoods well. A city street director politela kept in the car, is another tin me tim saver for calls in unfamiliar loa ties.

6

With garrulous patients, I me m alarn firmly for my hat when I've finish the examination. If that's not enough about I hint that other patients are w cithin a ing. Where the individual is es call is cially gossipy, I sometimes have ng off I secretary phone an "urgent" m on so I sage. Thus I avoid hearing how nt del strawberry festival caused the tient's belly ache.

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at once

was possible I plan house calls a my late-morning trip to the wild. My nurse asks patients to will, and my appointment slips "Telephone hour: 8:30—9:30 If phone calls are made at this it will be appreciated." Hence in usually start on house calls the hospital.

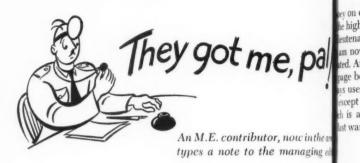
8

the supped driving home for lunch wastes tires, gas, time. I also for fewer follow-up calls than forms but the best time-and-tire is to avoid making house calls all consider the patient is well to come to my office. I expolitely that an office call will me time and save the patient

9

In the phone rings at 2 A.M., malarmed patient asks me to stonce, I question him care-bout symptoms, satisfy mywithin a reasonable doubt that all is really needful. Before \$60f I ask him to turn a porch mso I can identify his house at delay in the darkened





My dear Richardson:

Well, they got me. Here I sit in a little barrack room, an identification tag around my neck telling what flavor chaplain to call in extremis, and giving the address to which to ship the body. Or, to coin a phrase, I'm in the army now.

Shortly after December 7, I thought it over and decided that if Hitler won the war, a lot of guys I know could continue practice just the same. But since I couldn't. I decided that I had a pretty big stake in the war. The medical school tried to rationalize me into the position that as instructor in surgery I was doing my share. But I couldn't see myself standing in a surgical pit preaching sermons urging other doctors to give their all, when all I'd be giving would be an income tax and a grumble about gasoline. Since I have no children or other hostages to fortune, and as my wife is self-supporting (financially, but not emotionally of course), I felt that place was with the armed for

So here I am, the oldest tenant on this post-which wo be some cause for a gripe! didn't feel that the war job is big that fussing about the in nia on your shoulder is son petty. My even temper is be upset, though, by the fact! many of my colleagues, some them five or six years my ju are trying to wangle captain and commissions as majors by P Oh gaining with the Surgeon eral or seeking letters from gressmen. As a matter of fact on't ch feeling here is that these civil



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pey on civilians!) will exhaust the higher grades and we will the eutenants for the duration.

am now at——being indocted. At this point please turn page because in the army we as use both sides of the paexcept maybe in the latrine, this an improvement since last war when they used both



we keen in the latrine. Where I Oh, yes, in the latrine.

LI am here doing general or was the many at the many at

on't change my address on mailing list because the dum of my stay here is too unain. I may be yanked out next to next month. No one was where we will be yanked fact, no one knows who the fact is. However, we yankees worked out a series of motalite "if you keep very, very the War Department will the war from here." That

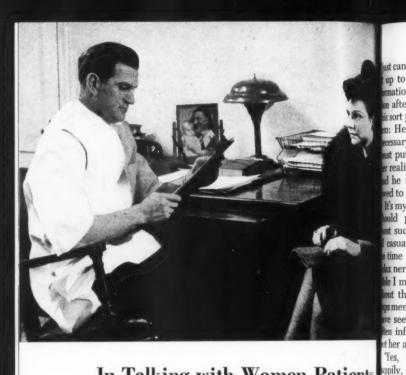
technique is no good for me, because I can't keep quiet, let alone very, very quiet.

I don't think I can do any writing for you at present because all copy has to be okayed by the Surgeon General, which sounds like a cumbersome and time-eating procedure. I have a manuscript for a surgical journal which still awaits the approval of my colonel. If that august authorization is granted, it will then be sent through official channels to the Surgeon General's office. So you can see the obstacles confronting a literary lieutenant.

My wife is home because we don't know how long I'll be here. This place gets pretty lonesome at night, and receiving mail is one of our chief excitements. So it would be a real contribution to national defense if you could drop me a line. In spite of what I said before, I really don't mind hearing from civilians. In fact, some of my best friends are civilians.

Indeed, I was once a civilian myself. Remember?





In Talking with Women Patients

By John Fraser, M.D.

"Never underestimate the power of a woman!" So we are reminded by advertisements for a leading woman's magazine.

To which might be added: "Never underestimate the importance of every phrase-and the way you say it-in talking to women patients."

Not that all members of the fair sex demand special consideration. But many do. Your success in dealing with them may depend largely on how expert you are at cajoling, coaxing, soot changing the subject, and plain listening.

roadens Male patients have their syncrasies, to be sure, but been my experience that dif Itgoes women patients are perha little more frequent-and cer ly more memorable. So let's sider a few of the more d defined types and what a done about them.

One is the nervous, she sier for frightened patient. At first information

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inst can't find words"; she leaves up to her doctor to drag inmation out of her with quesafter question. A patient of is sort poses a three-sided prob-: Her physician must secure cessary case-history facts, he ust put her at ease by making realize that he's on her side, d he must conserve the time ed to other patients.

I's my feeling that reassurance old precede questioning in at such cases. A few minutes asual conversation may not time wasted if they serve to a nervous tension. When pos-We I make it a point to inquire but the woman's family, perwe seen in the local paper. It en inflates her ego and helps ut her at ease.

s upply, "and did you see that when he way so his comments the nave?" him!"

Nothing in the doctor's maner suggests that other patients the best between the same of t hut hat I really came to see you did but is this..."

that It goes without saying that concer assational measures are fitted to eis individual patient. Some, for or portunities for casual, breakeice talk. With them it is often she sier for a physician to secure first information he needs by being businesslike from the start. Such an approach may not immediately dissipate nervousness, but it shows that the doctor is not evasive and doesn't expect his patients to be so either.

An older woman, sensitive about greving hair and lined face, will usually find confidence returning if her doctor treats her as though she were still vivacious and thirty. The manner indicated is rarely one of flattery-which may only insult her intelligence. Instead, it is a manner which simply avoids the tacit assumption that she is middle-aged or more. If she refuses to tell her age, the figure can often be obtained by indirection. "How old were you when your first child was born?" And later on in the visit: "What's the age of your eldest child?"

In an effort to put taut patients at ease, a physician may sometimes be tempted to assume a hearty joviality. I believe that this is almost always a mistake. The patient has come on what is to her a serious business. Jokes or a facetious manner may make her feel that her doctor is disinterested and perhaps likely to ridicule her worries. I am not of course prescribing an exclusively sobersided demeanor; it's just that women seem less able than men to reconcile sympathy with levity.

In direct contrast with the patient who must be led into conversation is a second type. This

69

rarely to the point. Rather frequently she has neurotic symptoms. She complains about her liver, lungs, and lights; she bridles when her doctor pronounces them whole; she vehemently resents any intimation that her difficulties may have their origin in emotional conflict. What she really wants is intelligent and sympathetic listening. And within the limits imposed by necessity, I believe this is what she ought to receive.

The doctor who has so little time that he cannot listen isn't going to have much success with neurotics. Proper listening is often a major part of the treatment. There's probably no surer way to send one of these patients into the hands of a cultist than to say brusquely: "There's nothing wrong with you. So go home and forget it."

If a physician, recognizing the existence of a neurosis, decides to treat the patient himself, he has no choice but to give liberally of his time. He can avoid reception room jam-ups by instructing his nurse to schedule all further appointments with the neurotic at the end of his office-hour period.

Superficially similar but meriting drastically different treatment are women patients who waste a doctor's time in idle chatter-who talk only for the pleasure they derive from the sound of their voices. To be classified with them, perhaps, are the gossips, the birdbrained, the kind who play unto the doctor, the mentally undisciplined, etc.

In my opinion, with patients of this kind, the physician is best advised to steer a middle course halfway between complete cord ality and peremptory abruptness For most of us it is not politic to dismiss such patients with the brusqueness they invite; and it is impractical to listen endlessly Here are a few devices for muting the talkative type at the end of a visit which I've gathered from colleagues:

"My nurse comes in and 'reminds' me that I'm due at the hospital shortly."

"I look at my watch; and, when there's a brief pause in the conversation, I get up and stand by my desk.'

"After a while I simply say with a smile: 'I'm terribly sorry I don't have more time to spend with you-but there are other patients waiting,"

"In extreme cases, I stick a thermometer in the patient's mouth signal my nurse, transfer the conversation to her, and excuse myself."

Among the other kinds of wom- he mad en patients who require special publem consideration are oversolicitous mothers. A physician has to tread carefully in dealing with a mother's natural pride in her children and yet still manage to expedit om Ne the business at hand. Probably active the best approach is to analyze memb

[Continued on page 110]

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Your Legal Questions Answered

By James R. Rosen, M.D., LL.M.



What responsibilities does a phyician undertake when he acts as witness to a patient's will?

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If the patient dies, the physican may expect a call from the decedent's attorney or next of kin make his personal appearance before a court official to attest to her the fact that he signed the will s a witness and to attest to the renuineness of his signature. Uner ordinary circumstances this with sthe extent of inconvenience to which he may be put.

However, other possibilities remain. If at the time of the execu-

If you are confronted with a medm-legal question of broad interest other physicians, submit it to VEDICAL ECONOMICS for reply. Almy hough personal legal advice canbut be given here, every effort will on he made to throw light on legal cial poblems with which physicians merally are concerned. Dr. Rosen s a member of both the medical of legal professions: He received M.D. from the Long Island Colles of Medicine and his LL.M. ditt from New York University. Though able active medical practice, he is also yze member of the New York Bar.

tion of the will the decedent was extremely ill or for any reason unable to sign it properly, the probate court may require that the witnesses also satisfy the court that the circumstances were such that the maker, in spite of his infirmities, understood the nature of his act. Proof of this would necessitate the taking of testimony under oath.

Should the validity of a will be contested by a dissatisfied relative and a trial of the issues become necessary, the physician would probably be found on the witness stand, subjected to gruelling examination by opposing counsel.

Almost anyone who has had this experience will vouch for its unpleasantness and inconvenience. All of this, one must bear in mind, is without remuneration. The physician, as subscribing witness, must in furtherance of justice render this testimony. It is an obligation he has undertaken.

There are no legal or ethical restrictions to bar a physician from acting as a subscribing witness to a [Continued on page 112]

[10]

Motor Stocks as an Investment

Facts on the current and postwar earnings outlook of the biggest U.S. industry, now fully converted to armament production



The order to stop motor car production eliminated a peacetime industry that grossed nearly four billion dollars in 1941. The result was perhaps the most sudden and revolutionary change ever to occur in an American industry.

Late in 1940 ordnance officials asked the automobile companies if they could undertake mass production of machine guns, tanks, and plane parts. The manufacturers offered to try. Today, a single automobile company alone —General Motors Corporation—has signed up to produce 12 per cent of the country's entire arms output.

In 1941 more pleasure cars were sold than in any other year except 1929. In 1942 the motor industry must depend on war goods for its profit. What, then, is the outlook for motor stocks held by the investing physician?

The automobile industry already has more than ten billion dollars of war orders on its books, compared with four billion before Pearl Harbor. This backlog exceeds more than two years of ordinary volume. Yet war production officials believe the industry can be pushed up to an ume of fifteen billions a year the necessary tools, labor, an materials are available.

An analysis of the war contracts of the "big three," General Motors, Chrysler Corporation and the Ford Motor Company reveals that when they are producing at full capacity on their present orders, they will be turning out \$10,500,000,000 worth dequipment a year. This rate will be 250 per cent of what these companies produced in 1941.

Before the industry hits its warproduction peak it will need more than 800,000 workers, compared with 550,000 in the best peacetime years. This means that the industry will not reach capacity operation until thousands of women en are trained for the part they must play in the all-out conversion to war work.

Auto workers will turn out 30, 000 of the 45,000 tanks the Government wants this year. Chrysler is tripling the size of its huge

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asenal while General Moand Ford are constructing stomake light, medium, and tanks. Next year the intwill make upwards of 100,these land battleships.

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dwill employ 100,000 work
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late with production sched
b start this Summer. Nash
attor Corporation is mak
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cargo planes. Studebaker

wation and Packard Motor

Company are rolling out air-

plane engines; Willys-Overland Motors specializes in "jeeps"; and Hudson Motor Car Company in ordnance. In fact the industry plays an important role in almost every phase of armament manufacture, including the ship program.

About 60 per cent of a large, integrated automobile company's tools and equipment are adaptable for war work. In the case of the smaller concerns, concentrating as they do on car assembly, only 20 to 30 per cent of their car-making tools can be used. In both instances idle machinery is either greased up and stored, or, where possible, loaned or sold to one-time competitors.

General Motors, for example, has set up a \$2,000,000 reserve out of 1941 earnings to cover the expense of removal and storage of special tools that can be used again in civilian automobile production after the war. Chrysler, in the first major adaptation of automotive equipment to arms production, was able to supply 400 machines from its automobile production lines out of the 1,000 required to make the highly complex Bofors anti-aircraft gun.

CURRENT EARNINGS

The first half of 1942 will be a retooling period for the motor companies. General Motors, now employing around 200,000 workers, does not expect to reach its 1941 employment peak of 240,-000 until late Summer. The estimates of the date the industry can move into peak production vary from November 1942 to January 1943.

Thus stockholders can expect that earnings for the first six months of 1942 will be well under those of a year ago, although it is anticipated that most companies will manage to stay in the black. General Motors paid a common dividend of 50 cents a share in the first quarter of 1942, as compared with 75 cents a year ago. That action indicates that while profits showed a considerable dip in the initial three months of the year, the corporation still was able to make a substantial dividend payment from current earnings.

By early Fall, however, it is thought likely that production

kinks will have been worked Dealer and the industry established beg whatever profit level the pendi 1942 tax law and Government policy on profits limitation permit. Profit margins will di on various kinds of war good at of th For example it is unlikely # General Motors or Ford will much better than break even their tank output this year, though both may produce a stantial profits from this vent in 1943.

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DEALER OUTLOOK

A large percentage of an mobile dealers are likely to forced out of business by then cars as duction ban on civilian cars es can l trucks. Existing stocks of a t much cars and trucks constitute rgoing about two months' average by ness for dealers-and the Government are bu ment hopes to make this sup sion to last for the duration. There some talk shortly after Pearl Houstry o bor of allowing a smaller of then pany to produce a limited m used u ber of cars, but this plan, while ties to never got beyond the discuss one thi stage, has since been laid on a antindous l shelf.

will in Automobile makers are maki every effort to retain their deal priced organizations. The used-carbo of co the big ness may help dealers cover the elim erating expenses and overhi and tri for a time; but that business, ration is will dry up soon or later due *tsations* the tire shortage. The tire sit fairly v tion will also cause a sharp for the cline in dealers' service-dept als asse ment revenue by 1943.

pealer mortality will undoubted by be greatest among the small-make companies. Representatives of big three are most likely to my them through. Thus these good greconcerns, who did 90 per yell and come through with their dier groups relatively intact. This important competitive est matage they stand an excelent thance of doing an even lar-rhare of post-war business.

AFTER THE WAR and Should the war end in 1943, to emotor industry plans to remend mars as soon as the assembly are as soon as the assembly as an be re-established. There is not much research on post-war is busing brains of the industry are busing brains of the industry are busing brains of the industry officials drop a hint now the latest of the about the greatly industries to come.

anticipation that the tredous burden of post-war taxmaki will interfere least with the
desepticed car market. And that
were the big three.

The elimination of passenger
set and truck production for the
don which is not without its com-

thing executives admit is

e st sations. The banner 1941 outfairly well saturated the mardep for the time being. Trade ofds assert that had the industry been allowed to manufacture cars full tilt in 1942 it would have had an indifferent year.

As it is, assuming that the war is a long one, the industry is virtually assured of a large and sustained demand after hostilities cease. (This will be true not only in cars but also in such allied lines as refrigerators and air-conditioning equipment.) The domestic market for cars requires about 3,700,000 units a year to maintain automobile and truck registrations at the present 33,-000,000 level.

At present, cars are being taken off the roads at an ever accelerating rate; and even though blocked-up in dead storage, a car deteriorates rapidly. Still another factor to consider in calculating this accumulated demand is the likelihood that as the war goes on and tires get scarcer, old cars may end up in the auto graveyards earlier than usual because of their increased scrap value.

PLANE BUILDING

The war is providing the motor industry a golden opportunity to enter a new field. All authorities seem agreed that commercial aviation will come into its own after the war. Six automobile companies are making airplane motors; two are making propellers; three make completed planes; and virtually all are supplying airplane parts and accessories. Studebaker is the only company to announce that it will not stay in the aircraft business perma-

cuss

nently. Ford and General Motors executives have intimated they expect to compete in the postwar markets for transports and

private planes.

The industry is acquiring the "know how" of aircraft manufacture and is applying to that knowledge its famous mass-production methods. Aircraft manufacturers are digging in as best they may for the severe competition that lies ahead. Chances are that when the war is over, the motor industry will have the most extensive and integrated planemaking facilities in the world.

THE SMALL COMPANY

The war has given the small automobile manufacturer a new lease on life, insecure though it may be. Many have substantial war contracts to make such products as trucks and armored cars -lines where the profit margins are larger than in tanks, guns, and plane assembly.

The 7 per cent margin of profit which is average in the cost-andfixed-fee arms contracts will give the smaller companies a better return (before taxes) than they have been generally able to realize on auto sales since 1929, Sui a profit margin, on the hand, is well below the average of the mass producers.

Thus it is that earnings of m of the smaller companies running ahead of those renove in recent years. These concern have an opportunity to build impaired working capital, the by enabling them to renew the fight with their big competitor later on. For the time being the outlook is as promising as that any industrial group. Even s they are forced to utilize increase earnings for working capital a to fortify their financial position rather than to make substanti stockholder disbursements. Mor important still, their long ten outlook continues unfavorable.

The outlook for the automobil parts and accessory concerns essentially the same as that of the automobile companies. One et ception is the plate-glass maken who do not seem to have a large part in the armament program One glass maker has turned t prefabricated housing to offer the loss of its motor car business

The dollar output of the part

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Fully equipped for obtaining blood specimens. Provides a safe means of conveying, intact, diluted blood and blood smears to

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for tonic action in the ELDERLY Patient

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dehydrating and constipating precipitates which may be difficult to assimilate. It arrives in the intestine as a stable, fully hydrated, colloidal oxide which is readily assimilated.

In over 40 years of world-wide use, it has been observed that OVOPERRIN is not only a rapid blood builder but actually stimulates the appetite and improves the well-being. It is palatable, odorless, and non-staining but it does not rely on sweetening, masking, or coating to achieve these properties. They are inherent in its colloidal state. Dose—one tablespoonful in a little milk or water at meals and bedtime. Samples on request.

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and accessory companies in February ran at about 48 per cent of their \$111,000,000 monthly peak in 1941. When operating at full capacity on present orders the group will produce \$116,000,000 in war goods a month, or 104 per cent of their 1941 top level.

Some time ago it became evident to most investors that the peacetime business of the motor industry would be among the first to be hit by war. Not so clear, earlier in the defense program, was the status of the other civilian industries that now are being added almost daily to the industrial casualty list. Thus, motor stocks which sold off sharply before are now stable in an unpredictable stock market.

The stockholder who finds he company making tanks and gus these days rather than automobiles is at least in a more confortable position than the hold of securities in a company has hit by war taxes and rising prices but unable to offset these factor by volume war production.

When the war is over, automobile stockholders will probable find themselves in a better position than investors in, say, the metal industry, which has a vastly expanded production but which must compete later on for a greatly lessened peacetime volume. It things look now, the automobilindustry will emerge from the war in a relatively strong position.

—RAYMOND L. HOADLE



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prominent physician states in important article** on smoking, that when injections of nicomiewere increased by only 25%, profound changes in blood presure occurred.

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*J.A.M.A., 93:1110-October 12, 1929
Brückner, H-Die Biochemie des Tabaks, 1936

**The Military Surgeon, Vol. 89, No. 1, p.7, July, 1941

SEND FOR REPRINT of an important contribution to medical literature—"The Cigarette, The Soldier, and The Physician," *The Military Surgeon*, July, 1941. This significant analysis reveals many new angles about smoking that should be valuable to you when modifying patients' smoking without disturbing their smoking enjoyment. Write to Camel Cigarettes, Medical Relations Division, 1 Pershing Square, New York City.

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What They're Reading

MINISTRATIVE MEDICINE

hed by Haven Emerson, M.D. 826 ps, plus introduction and index. 150.

This book is designed, says editaven Emerson, to give the sician a more precise description of administrative medicine, tem used here to describe all peof public health services. A mod and equally important is "to correct a common tentry among physicians to continue themselves only with the dical and health needs of their

trition; maternal, infant, and child hygiene; milk, drug, and food control; and such special problems as hookworm, tuberculosis, and venereal disease.

An encyclopedia of public health activities, the book is a monumental compilation of data about a field of increasing importance. It is bound in looseleaf style so that it can be kept up to date.

THE MAN WHO LIVED FOR TOMORROW

By Wade W. Oliver, M.D. 471 pages, plus notes and index. E. P. Dutton. \$3.75.

This is a biography of Dr. William Hallock Park, one of the first physicians to apply in America the epochal discoveries that have made possible the control of diphtheria.

Dr. Park, a member of the New York City Department of Health for 46 years, aided in the development of the first diagnostic diphtheria laboratory in the United States. In 1894, he supervised the production of the first diphtheria antitoxin administered here.

The story of Dr. Park's many

contributions to public health is told in well-documented detail. A reader might wish, however, that the biographer had made use of a less enthusiastically uncritical approach.

THE STATE OF THE NATION'S HEALTH

By Logan Clendening, M.D. Nation's Business. March 1942. 25 cents.

"It seems to be an inevitable attitude of the official mind, when elevated to a post which has to do with public health, that the first thought is 'Now I must scare the liver out of everybody.' Surgeon General Parran has said that 40,000,000 Americans are in a state of semi-starvation. And Paul V. McNutt, from a ripe clinical experience in the law and public office, capped the general by saying that 95,000,000 Americans didn't know how to eat."

This quotation is from an article, written in Dr. Clendening's usual pungent style, which sets out to demolish the thesis that the impairment of U.S. health is

a national disgrace. He points of draft rejection statistics can be soundly compared with the of earlier wars, and cites figure to show that malnutrition is a prevalent than commonly pained. His own belief—that the U is the healthiest large country the world—is not proved as we as it might be in this short artifor lay consumption. But it make refreshing reading.

FITNESS FOR FREEDOM

Twenty articles on health in a time. Survey Graphic. March 194 40 cents.

Serving its readers a shoty dose of articles on current heat problems, this special issue of the Survey Graphic presents a num ber of medically well-known with ers. Among those present, and their principal contentions:

Dr. Haven Emerson: "Or structure for public health is start a crude, inadequately supported and politically bungled under taking which must be reorgalized to do the whole job for a

DOCTORS ENTERING THE SERVICE

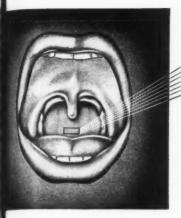
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the people in this country."

Dr. Hugh Cabot: "Fortunately we are no longer required to continue the endless argument as to whether good medical care is now being received. The plight of the draftees has proved up to the hilt that the statement is false. Our present plight is largely due to expensive methods which attempt to retain the shibboleths of free choice, individual competition between physicians, and fee-for-service methods based on what the traffic will bear."

Dr. Thomas Parran: "As yet we have made only a feeble start in putting our medical and nutritional science to work for all the people. We have scarcely begun to face our problems..."

Dr. Martha Eliot: "Unpleasant as it is to face, our basic problem in this country lies in the fact that we, today, have no such complete network of public health services, of maternity care, of health and medical services for children, of hospital and clinic care, as did Great Britain when she entered the war. The inade-

quacies in our provision of med cal and hospital care have be velong recognized."

Among other contributors and their topics are Dr. Howard Hay gard (excessive drinking); h. Abraham Myerson (mental healt and morale); and Dr. Kingsle Roberts (how to organize a medical service plan).

ARE OPERATIONS NECESSARY?

By Morris Markey. Liberty Magazine. March 28. 5 cents.

A reporter digs up random fact to suggest that medicine is not coming out of an orgy of surgery and that the days of disguising unsure diagnoses with exploratory operations are happily over As evidence of the trend, he mentions injections of mercurochromand other substances to the prostatitis. The ground is rapidly and incompletely covered, even though few will disagree with the writer's thesis that effective substitutes have been found for som forms of surgery.

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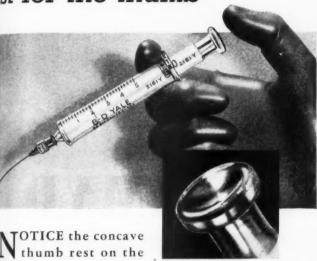
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Base Hospitals for Civilians

A round-up of hospital news which also discusses the interne supply, training of nurses, open staffs, and plasma



ritian victims of enemy action receive free temporary hosalization, according to a joint rement between the Federal mrity Administration and the fee of Civilian Defense. The in will be financed by special and allotted to the U.S. Public talk Service by the Federal curity Administrator.

According to a report from the D, all voluntary and governathospitals in the country may as casualty-receiving hosals of the Emergency Medical rice. They will be reimbursed the Government at established a A similar arrangement will by to institutions in "safe a" which serve as emergency hospitals for casualties or rules from casualty-receiving pitals.

haff physicians in civilian hosle are to be organized into to staff these base hospitals civilian casualties. The units be affiliated with OCD's base pitals in the same way the y's affiliated reserve units are when to army base hospitals Base Hospitals Now in War Zones," March MEDICAL ECONOMICS).

The physicians selected for this work will be commissioned in the Public Health Service Reserve, and will receive rank, pay, and allowances equivalent to those in the army medical corps. Personnel will be recruited by the Procurement and Assignment Service from among older age groups, doctors with physical disabilities, and women physicians.

There will be no decrease in the number of internes available for hospital duty, declares the American Medical Association's Council on Medical Education and Hospitals. The council's recent annual report indicates that the accelerated program of medical education may even tend to increase the number of internes.

Other information revealed: There are now in training 7,219 internes and 5,756 hospital residents, assistant residents, and fellows. As of March 1, 1942, there were 1,070 approved hospitals, of which 294 were approved for in-



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The institutions approved interne training offer 7,228 iterneship appointments eachyothe hospitals approved for medencies provide 2,664 residence 1,887 assistant residencies, a 742 fellowships.

Money for the establishment blood and plasma banks in his pitals located in war-threatent localities is to be allotted by medical division, Office of vilian Defense. Besides helpit to meet hospitals' current requirements, these Government-subsized banks will build up a plass reserve for civilian use durienemy action.

A second reserve of plasmal civilian use will be provided the U.S. Public Health Servi Blood for this purpose is to collected by the American & Cross, and the plasma product from it will be sent to war-striken communities when local supplies run low.

The training period for numshould be shortened to increate the number of graduate numssays a recent editorial in H

DOCTORS ENTERING THE SERVICE

If you wish to receive MEDICAL II NOMICS while on active duty, advise immediately by post card when 9 change your address. We'll make en effort to see that the magazine resid you each month.

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07. DOLF

The Chart below

shows the daily recommendations of calories, vitamins B1 and C, made by the Committee on Food and Nutrition of the National Research Council. It also shows the percentages of these nutrients contributed by a 6-oz. serving of Dole Hawaiian Pineapple Juice

FOR BOYS AND GIRLS IN THEIR TEENS



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				VITAMINS			
eft-hand column gives the recommended this. The right-hand column represents the	CALORIES		THIAMIN B1		ASCORBIC C		
enlages of the recommendations found 6-ox. serving of Dole Pineapple Juice,	Recommended Nat'l Research Council Number	Dole %	Recommended Nat'l Research Council Milligrams	Doie %	Recommended Nat'l Research Council Milligrams	Dole %	
13-15 Years	2800	4%	1.4	22%	80.	15%	
16-20 Years	2400	4%	1.2	25%	80.	15%	
13-15 Years	3200	3%	1.6	19%	90.	13%	
16-20 Years	3800	3%	2.0	15%	100.	12%	
DOLE PINEAPPLE JUICE CONTRIBUTES	102 Galeries		0.3 Milligram		12. Milligrams		

LE Hawaiian Pineapple Juice



pitals magazine. Pointing out that an acute shortage of trained nurses has developed, it continues:

"There has been so much talk about the maintenance of 'standards' that it begins to sound as though this was placed ahead of the safety of our country and the maintenance of our liberties. There would be no high standards in a Nazi-dominated world ... Doctors are adopting a threevear medical school course, and their important interne and resident training is being cut to one year. Colleges and preparatory

Collection

Taking advantage credit bureau Stimulant membership need not await the moment when tough accounts are forwarded for thirdparty action. Some of us forget that many such accounts can be collected by merely suggesting, on our own statements, that a collection agency will take action—unless payment is made at once. For example, the second or third statement might include the following notation: "As a member of the Professional Credit Bureau, I am compelled to place all delinquent accounts with that agency for record and collection." Physicians who have tried it say the method keeps up collections without resorting as often to the commercial collector.

schools are shortening the courses. Leaders in nursing ed cation will show a similar read ness for patriotic sacrifices."

A strong protest that "closed hospitals are depriving pract tioners in several Pennsylvan communities of the opportuni for hospital practice is being voiced by the Medical Society of the State of Pennsylvania Through its official journal to society takes to task those or munities which allow hospital financed by the State, to exchi local physicians from courtesvi staff privileges. The result of su deprivations, it asserts, can or mean the destruction of local fessional initiative, the loss of richest source of graduate edu tion, and inferior medical for the local population.

Ouestionnaires to dischar patients which asked for sug tions and helpful criticism w sent out recently by a Hampto Va., hospital. The replies vealed two main sources of satisfaction. Patients reported the building was uncomfortal cold, and they expressed them ion that hospital employes denced a dictatorial manner ward patients. The hospital to steps to correct both situation

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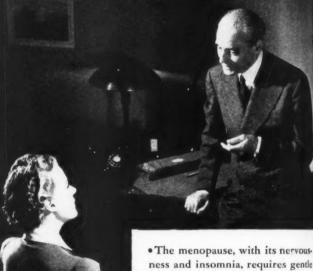
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Good Morning, Nurse!

conducting his class on physdiagnosis, Dr. Shaw has put third-year students through e sprightly paces. Last week levoted the quiz hour to testtheir knowledge of heart tims. One of the exhibits was tient so elaborately screened draped that only a small re of skin showed, large th to put a stethoscope to. by one the students listened. wrote their opinions and sed on to the next patient.

le guesses included auricular er, paroxysmal tachycardia, thyrotoxicosis; one alarmist tmust be ventricular fibrilla-When all had had their ice, one dramatic sweep of onws hand unveiled the mysamoderately pregnant lady, the worse for having ald fifteen students to listen le foetal heart beat.



months ago, John Bizek, 64, the help from the neighbordoctor for his hypertrophied m.u. tate, and was started on a se of testosterone. His ambiwhich had not extended bevond the desire to get four hours' uninterrupted sleep, soon widened to include a lively blonde of 35. They were married three months ago, and the incidental expenses must have strained a budget not designed for matrimony. Mr. Bizek had to forego the expensive androgenic treatment, and soon thereafter suffered a waning of his impetuous ardor.

He is single again now, and is being prepared by another doctor for prostatectomy. He is in hopes that the post-operative complications may not be quite so distressing as have been the pre-operative ones.



The preoccupied gentleman combined an extensive vocabulary with evident disinclination to shave. "Doctor," he said, "it's not likely you can do anything for my condition. Many other doctors have tried and failed. For ten years I've been suffering from a systolic murmur, and it's been giving me hell. I come to you now not for treatment but for prognosis. I'd like especially to

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have your written opinion that this crippling heart condition has made me permanently unfit for military duties."

系列

The habits acquired in medical school persist for a considerable time. Over the length and breadth of this land, in clinics, on the wards, and in doctors' offices patients are quizzed routinely on family history—with results significant of what?

A small contribution to this amorphous salad of data was made today by patient Lemuel Pugh when he was asked if there'd ever been heart disease among his kin. His brow creased for a moment in ponderous cogitation, and all at once his eyes lit up:

"Yeah, Doc! Me step-mother died of heart trouble."



Even in the matter of personal history, whose importance is axiomatic, the information elicited may prove too much of a good thing. Mrs. Sam Taussig had almost more of a past than to was time for in a mere 45life span.

"...And when I was i months old, I had the pneuma I've been coughing ever sing

"Your mother told you you it?"

"Why no, Doctor, I reme it just as clear as could be le on my right side, and some I can still feel a little aching here..."



During the discussion of a for our prospective base how unit, Pathologist Christof fresh from an autopsy, drop to ask for a place. Barron, of surgery, looks doubtful.

"You see, Chris, we must only men absolutely essentia war work. We've got to la surgeon, but as a pathol you'd be a lot more used home."

"You think so, do you? We do more anatomic dissection most of you surgical fellows if I can do it here, why not front? Only one difference

"Here's my check
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the delay."



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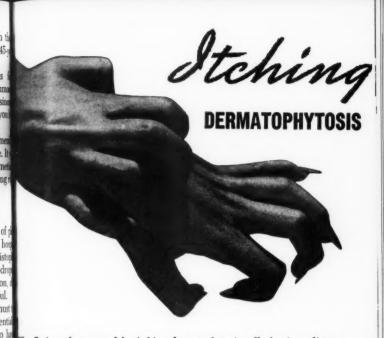
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Esuffering often caused by itching dermatophytosis calls for immediate ac-Your prescription must relieve pruritus promptly and also be highly effective tting at and destroying the fungi. Moreover, it must be easy and convenient to without messiness or detrimental effects on clothing.

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tween my patients and yours, Chief. Yours bleed a little more."

X.3

"It's like this, Doc. I haven't got much dough, and this cough kept gettin' worse. So I went to the free clinic, and they punched my chest and took an X-ray and made me bring my spit. Kept me comin' for days, and then this doctor he tells me, 'Slattery,' he says, 'you've got something more than a cold. You have t.b.,' he says, 'and it's up to you if you get arrested or not. You'd better be a careful man from now on.'

"Now I put it to you, Doc. If I got t.b. or if I ain't got it, what did I do to get arrested, will you tell me that? Them charity clinics—nothin' for nothin' is the way it comes out..."

comes out...



The earth has circled the sun, and it is time again to bolster, with syringe and needle, my defenses against the inevitable flowering of the ragweed. I, for one, should think myself amply rewarded for the alarms and an-

guish of spinit brought on us war, if, when my gas max finally delivered, it should me an adequate pollen-screen in ing the hay fever season.



Nurse Dillon, beaming sisterly pride, stops me to im the news that her brother young and eager Andy Han has just passed all his tests been admitted to the school commissioned officers. It see that after distinguishing him in training, and being rea mended for admission to school, he had twice been h back when his pulse went to during his physical exam. Si Dillon thereupon sent him a biturate capsule to take be appearing for the third exam tion. The kid was snoring le in the anteroom when his came, and was passed will heart rate of 72 before he ized it was time to worry.



Twenty years after being ten by the pallid spirochet,



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A recent published report quotes an executive of a hospital preparing its own solutions: "In the event of any reaction, the nurse reports the number of the bottle so that we can more accurately check the possibility of unclean equipment, etc.'

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Agar is now making ready to cross the ocean in a specially built plane and persuade Hitler to stop being bad, restore his victims' property, and pay everyone a just indemnity. "I got the money to make it worth his while. Money talks, Doc, and I got enough to fix everything. And I got one billion put away for you too, Doc. I like you because you're like me."

How sad to destroy with treatment this glowing sense of power, this all-embracing euphoria, and restore Ted at great trouble and expense to his accustomed state of dull inadequacy. There is also the natural reluctance to forego the lush bonus that is to be my share. A billion dollars, even after income tax, makes a handsome annuity.



After considerable prodding, Colleague Benfield finally went to Proctologist Barat to have his hemorrhoids attended to. In the course of the rectal examination, probing thoughtfully all the time, Barat kept up a running commentary: "Hmm-ah...yes, yes. Foolish man. For many years m vou've insisted on eating orang and sneaking a piece of bao knowing all the time these thin do you harm. Why do you do

"Sa-ay! You can tell all with one finger? What's w method. Barat?"

"No method, friend. Your w just called me and said you we on your way here, and to be si and warn you about your food idiosyncrasies."



At the clinico-pathologic or ference, a fulminating case of laremia is presented. The patie had gone hunting, had scratch his finger while skinning a rab and had died within a week would seem that after counter in ages of hunting and carnivon dement ness, man has not yet persual hysiol his victims to acquiesce in the bring sacrifice. They yield us their tree, a luctant flesh, barbed with and del Trichinella, the tapeworm, the Bacillus tularense-these Since live after them and take politias be humous revenge. Ribothi

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Dr. H ks ab

Keep lidn't sa vate fir

Dr. Cr. Rankin rax fo rk him ald se to see

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To Avoid Passing Judgment on Colleagues

According to Hoyle

ur was flying in the staff room Dr. Hoyle ambled in.

See here, Rankin," Dr. Crabre was expostulating. "If you are any more derogatory rearks about me, I'll..."

Keep your shirt on, Crabtree. didn't say anything derogatory."
Excuse me," piped up Dr. ole, "but if this isn't a purely trate fight may I ask what's the atter?"

Dr. Crabtree explained:

Rankin here advised pneumomax for a patient. After he'd if he didn't do that kind of ak himseli, she asked if she mld see me. He said no—told to see Nichols instead. Now is probably telling her neighsthat I'm a quack."

Hoyle" is the pseudonym of hysician of long experience—a prominent in the affairs of his society and familiar with the add obligations of medical practifier he discusses another of problems that can throw sand physician's relations with his that and colleagues.

Just then the annunciator summoned Dr. Crabtree downstairs. He slammed the door behind him. The two remaining physicians were silent a moment.

"It was a tough spot, Dr. Hoyle," said the younger man. "You know as well as I do that Crabtree isn't too good with a pneumothorax needle. Not his fault—I'd be clumsy at it myself. But Nichols has a real knack for collapse work, and since Crabtree might easily have bungled it, I could hardly remain silent."

"Tell me, exactly what did you say to this patient?"

"I told her that Nichols was far and away the best pneumothorax man in town. What else could I have said, and still be honest?"

"It's an old problem, of course," remarked Dr. Hoyle, "and no less difficult because it's old. But if I'd been in your shoes, I'd probably have tried something like this:

"Why, yes, Dr. Crabtree is a good man. It so happens that I usually work with Dr. Nichols on these cases. He's a first-rate man too. I know his methods and he knows mine. If you want Dr. Crabtree it's perfectly all right. Only it would be somewhat simpler for all concerned if you called in a physician with whom I generally work.'

"Had you tried this approach," Dr. Hoyle concluded, "your patient would probably have picked Nichols on a basis of convenience, not competence. And Crabtree would have had no complaint because you didn't imply anything derogatory."

Instead of an Annuity

[Continued from page 61] having studied a good many programs, I am convinced that there is no definite proportion of in-

come which should always be spent for insurance.

I suggest that you develop program which will provide the benefits you wish to have. The if the cost is too great, reduce the program until the cost is within the limit you can afford.

Buy only as much insurance a you can pay for in bad times a well as good.

TERM VS. ORDINARY LIFE
Mu insurance includes \$15

My insurance includes \$15,000 of term and \$20,000 of ordinal life insurance. Is this ratio about right? I have a wife and four year-old child.

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> CARDIAC FAILURE

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1. Am. Heart J. 22:607, Nov. 1941.

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of the policyholder (ordinarily for the protection of the wife); (2) term insurance for temporary needs (generally for protection of children while they are growing).

DOUBLE INDEMNITY

Would it be wise to discontinue the double indemnity feature of my life insurance and apply the saving toward other insurance?

Double indemnity provisions may in most cases be dropped to advantage. The insurance needed at a man's death should be based not upon the manner of his death but upon the requirements of his dependents.

REDUCING PREMIUMS

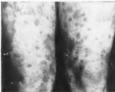
Is it possible to reduce the premium on an ordinary life insurance policy?

Yes. It may be reduced, in defect, by substituting term insurance for the ordinary life insurance. However, the replacement may require passing a medical examination.

Frequently there are others lutions to the problem. As didren grow older, for instance life insurance needed to protect them can often be reduced a discontinued entirely with a consequent reduction in premiums.

DISABILITY COVERAGE

Is there any way of maintaing the permanent disability ture of an ordinary life policy the policy is placed on an a tended term basis (converted to term insurance)? [Turn page 1]



[Before Use of Riasol]

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[After Use of Rissel]

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No. If the surrender value is taken in the form of paid-up insurance or extended term insurance, the disability feature will be cancelled. Ordinarily, this should be avoided at all costs since disability protection is highly desirable and deserves to be retained. Rather than give up the disability coverage, it might be better to discontinue other insurance. An alternative which is sometimes satisfactory is to have the company replace the policy with another of smaller amount, discontinuing the rest of the insurance or placing it on an extended term basis.

HEALTH & ACCIDENT

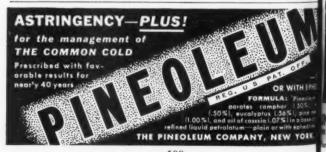
I am interested in health and accident insurance, but I am skeptical of its value at my present age. Following are the reasons for this conclusion. If there are any fallacies in my point of view, I wish you would let me know.

I am now 37 years old. I doubt if there is any disabling disease which I run a serious risk of contracting. Coronary thrombosis is statistically my greatest chance of disability, but I would pably recognize it before it very far.

So far as the risk of a maccident is concerned, such accident would probably hone of two results: It would ther kill me, in which case life insurance is available; a would require a few month pitalization, for which I hospitalization insurance. Its of course, that there are posities of losing one's eyesight example, in an accident, but risk appears to be exceeding such as well.

For these main reasons! that the expense of health accident insurance at my whardly justifiable. Inasmudthe premium for such a p does not increase greatly advancing age, I see no m why a decade or so from would not be a good time to buy such insurance instagetting it today.

This question strikes at the for example, is not when



Eudic

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and pound jars and convenient 1 oz. injector tubes

tilly tab Eudicaine Ointment you can now give your patients prolonged relief from 10 m ching due to irritated nerve endings as in pruritis ani et vulvae.

rom Edicaine Ointment is indicated as relief only in this truly "incapacitating and no increasing disease." Severe cases may require radical curative therapy.

The use of Eudicaine Ointment is also indicated in cases of hemorrhoids, dry mema and chapping as well as other skin irritations such as insect bites, superficial mms and sunburn.

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house next door is blazing, but when there is no danger. The risk is then such as to permit the company to do business for a reasonable premium.

Similarly, the time to buy health and accident insurance is when you are intact and in good health. True, the chance of becoming disabled may be small; but this is not the only thing to consider. The seriousness of the disability is of equal importance. If it is serious, you will probably need money and need it badly.

The argument that the risk is small might also be used against the public liability insurance you carry on your car. The chance of injuring or killing anyone and of having a large judgment entered against you is infinitesimally small. Yet you carry the insurance-why? For the simple reason that you realize the magnitude of your liability if you ever did have a bad smash-up.

The same is true of health and accident insurance. Your chances of being permanently disabled are slight, but if you ever were so disabled, the amount of money you'd need to support yourself year after year would be a staggering one.

Since total and continuing disability is the most serious eventuality, your policy should pm vide an income for as long a time Butter to get this long-term coverage even if you have to forego bene fits during the first few days of weeks of disability.

Women Patients

[Continued from page 70] the reasons that give rise to m ternal over-anxiety. Generally matter traces back to an imagina tive fear of what may lie in ston for the child.

The analysis suggests the ren edy. It's well to explain the situa tion clearly and carefully to the mother, to enlist her help in the management of the case, to built her confidence in the child strength and in medicine's pow er. The request for her cooper tive participation usually bring far better results than merelyte ing her "not to worry"-rather useless admonition to give an nervous mother.

I'll concede that sometime mothers must be treated a little more directly. A pediatrician know makes it a rule to ask the mother to leave the room who he is examining or treating le child. "I simply tell her I want spare her feelings," he says. "An

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it's a lot easier to control the child when she isn't around."

You may say that to write of women patients as a "problem" is to magnify the issue. You may be right. It happens that I practice in a town where their goodwill is highly important to a doctor's practice.

I suspect it's probably equally true in your community.

Legal Questions Answered

[Continued from page 71]

will. But it will sometimes obviate considerable inconvenience if he can decline to do so.

What should a physician bear in mind when issuing a certificate describing injuries sustained by his patient in an accident?

He should proceed on the presumption that he will be called upon, at a later date, to verify the contents of his certificate. Here are some specific points to remember:

1. The certificate should be properly and accurately dated. This establishes its proper place in the series of events involved. Care should be exercised to record the dates of the beginning and ending of treatment; if treatment has not been completed, it should be so noted.

2. Description of the init should be exact and suffice detailed to picture properly true extent. Any tendency to large upon their nature the be avoided, even at risk of patient's displeasure. (Re ber that the physician, not patient, may later be called un SUP to substantiate the certificate is also important to list all juries sustained, even those minor character. It may affect credibility of a physician later attempts to add items of jury to a previously written tificate.

3. Opinions as to the per nence of injuries should be a fully considered before the incorporated. They should be down only if they can be rea substantiated. Here again, tendency toward exaggent should be avoided; you may to defend your words in con-

4. It is of paramount impance that the physician ind in his office records the fatthe has issued such a certificits date, and its contents in It must be remembered that siderable time may elapse tween the issuance of the cate and the time when the sician, usually on the wistand, is called upon to verify



GOMCO CIRCUMCISION CLAMPS

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Gomeo Circumcision Clamps make a bloodiest a practical reality! The operative procedure is simplified-requires less time-gives clean cit which seal in 24 hours. No sutures are require newborn, and the danger of infection or hearn greatly lessened. Write for Free technique lakes

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White—No Stains, No Burns,
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Treat Eczema the Improved NEW Way—Prescribe

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(Nason's)

Original 2 oz. Jar Either 10% or 5% Strength Samples on Request

"Swartz and Reilly "Diagnosis and Treatment of Skin Diseases" pp. 66-7.

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contents. Too often it happens that a physician is not only surprised but embarrassed to find himself confronted with a certificate he had previously issued, but about which he had completely forgotten.

A certification is the written testimony of its writer. Since a physician does not know into whose hands it may fall, he must prepare himself through these four measures for the time when he may be called upon to reaffirm its contents.

What is the liability of a physician who accidentally breaks a hypodermic needle while giving an injection, thus necessitating an operation for its removal?

a particular case. Since the derlying principle (res intelle quitur) is fundamental in m mon law, the conclusion liability is probably validing State.

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In this case a needle by while a physician was giving injection, and the broken ment was imbedded deeply the patient's body. The patient instituted suit, maintaining the doctor was guilty of malno tice.

At trial, the plaintiff attempt to prove his case by showing the needle had broken during injection, and that since par the needle remained in his b he sustained damages. Howe

Moorhead Freatment Unit Suction and Pressure Freatment Unit

THIS new Moorhead pump meets every de-mand of the practicing physician. It follows the modern trend in design. Top is of black glass; trim is chromium plated. Cabinet is finished in White Enamel, Mahogany, American Walnut, or any desired color finish to suit individual office furnishings (\$5.00 extra). Special Features include the new spring suspended motor-compressor unit-making it noiseless and vibrationless. Motor unit equipped with carrying handle for portability. High pressure type rotary compressor. Positive and negative pressure control. Built in two-way valve in the air pressure line. Complete accessories accompany apparatus. Invisible ball rollers facilitate easy moving.

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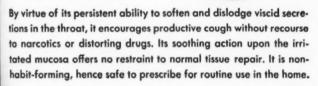
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mony in support of his contention that the physician was negli-

gent.

The defendant physician introduced expert testimony which bore out his contention that, even with the exercise of the highest degree of skill and care, hypodermic needles do occasionally break. The defendant's expert witness also testified that the defendant had exercised the highest degree of skill and care possible. The plaintiff did not offer any evidence in rebuttal of this testimony. The doctor won the case.

According to the court, the fact that the needle broke in the body of the patient was incompatible with proper and successful medical treatment. Hence proof of this occurrence placed the burden of explanation upon the defendant physician; it was then up to him to prove that this could occur and still be compatible with medical treatment performed with the required degree of skill and care.

Having introduced testimony showing that what had occurred did so even though he had exercised great care, the defendation overcame the presumption negligence, particularly since the plaintiff failed to offer any endence in rebuttal. Consequent the court ruled that in the assence of medical evidence to the contrary, it must be assumed the breaking of the needle who the due to negligence.

Once You're in the Army

[Continued from page 52] dinary life, 20-payment life, 30-payment life. The favoral rates are indicated by these amples: Monthly premium of for the 5-year term insurance, age 35, is 76 cents per \$1,000 erage. For ordinary life, 6 monthly cost at age 35 is \$1 per \$1,000.

For a more extended disc sion of National Service Life surance, see the April MENI ECONOMICS article, "Service surance Explained."

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If an officer dies in the line duty, the Government grant dependents his pay, but with

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IN THE FREQUENT DERMAL AFFECTIONS OF CHILDHOOD

The desquamation stage of contagious diseases, while ushering in convalescence, may nevertheless prove the most uncomfortable period of the illness. The pruritus which characterizes desquamation, as well as the intense itching of ivy and oak poisoning, food and drug rashes, impetigo, and eczema, demand prompt and dependable relief. Regardless of cause, Calmitol Ointment controls pruritus. It may safely be applied to the skin of infants and children without fear of irritation. A single application usually is effective for several hours.

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allowances, for six months after his death. If disabled, he receives his care plus his pay and allowances during the war; afterward, Congress will presumably enact special legislation.

Upon release from the Army of the United States, an officer or his dependents will doubtless be entitled to pensions. Congress has enacted pension laws after each war.

INCOME TAXES

The individual in military service must pay an income tax on the same basis as every other United States citizen.

FAMILY MAINTENANCE

Physicians about to enter service are strongly advised to find out about living conditions at their assigned stations before taking the family along. In many army-camp areas, living conditions are poor and rents are exorbitant. Children complicate the problem of finding suitable living quarters, and schools may be unsatisfactory.

In view of these considerations and the unpredictable changes in military assignments, many officers leave their families at home. Others follow the expedient of renting furnished rather than unfurnished quarters, to avoid some of the headaches and confusion

of frequent moves. All agree or the wisdom of traveling light.

In further providing for the family, consideration should be given to the making of a will unless one is already in existence and still valid. The officer wi probably wish, also, to put a accounts and titles in joint own ership, or to give his wife a pow er of attorney, so that his affair will not be tied up during m tracted absences or in the even he does not return.

-PATRICK O'SHEE

Better Press Relations

[Continued from page 45]

you have a fair picture of med cal press relations in many part of the country. Yet good relation with the fourth estate could be an asset of incalculable value the profession in its job of win ning friends and influencing pub lic sentiment.

The problem needs radical and V.Ray continuing treatment. The hang size is so up-the-receiver technique has on ly aggravated the situation. has produced a sort of psychiator as logical impasse between the within newspaper editor and his be potential source of medical is rormation. Consequently, edito to the why in usually short-circuit the professioned discountry.

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sion entirely, with the result that medical stories are often incorrect or inaccurate.

Unfortunately, most medical societies haven't faced the problem. In fact, many have responded in recent years to the public's growing interest in matters medical by adopting a policy which worsens the situation. They have for the most part taken an increasingly rigid attitude toward any publicity received by their members. In some places physicians have come to fear having their names appear in print for any reason, however free from the taint of self-promotion.

Borrowed Light

Did the architect design your reception or consultation rooms

with too few windows? If so, you can often brighten up an inadequately lighted room by borrowing light from another. Simply have an opening cut in the wall or partition which separates the dark from the well-lighted room; then have glass panels installed in the opening. If privacy is not essential, transparent glass will let through substantially more light than will frosted glass. The cost, of course, varies widely; in one case a doctor brightened a dark consultation room at a cost of \$13.50 for fluted glass panels and \$9.50 for labor.

This repressive policy would be far less injurious to the interests of the profession if a work able substitute were provided for the prohibited direct contact between doctor and editor. In other words, it would be both ethical and good sense for organized medicine to try to plug un individual leaks in the publicity roof if it provided a controlled channel for such communications.

When the editor of a local paper is denied the privilege of consulting the doctor concerned in a given case, he cannot be blamed for medical errors. Clearly, it behooves organized medicine to stand ready to pre-edit medical news, and to furnish immediate consultative and interpretive service. A gentlement agreement between press and profession can insure that an individual doctor's name will not be used-or if mentioned, he will at least not be given any unwelcome professional boost.

Here and there in the country. progressive medical societies have jumped at this opportunity for s no co securing a "good press." They have set up a medical information service under guidance d an executive officer or a special ly employed publicity director. Through him the newspapers cal

feature of SINUS INFECTION is failure of drainage through the small ducts into the nasal passages. Many doctors say that-

The mucus solvent property of ALKALOL helps to induce drainage. THE ALKALOL COMPANY Taunton, Mass. Samples on request

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Sorparin is available in tablet form, each containing three grains Sorparin (Ext. Sorbus aucuparia, "McNeil.")

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obtain immediate, authoritative and (when desired) anonymous medical information. The service sometimes provides a channel for the issuance of properly sports or a bulletins on cases involving prominent citizens, while saving doctors in the case from distant ful notoriety or annoyance by reporters.

The plan usually follows the

general pattern:

Given a lead on some medicinews of potential interest, and tor calls the medical society are asks for verification or interpretation. The executive officer the promptly gathers the corresponding to the ditor is given what both he at the profession want: accurate soundly interpreted information ethically presented. No small at vantage is the fact that suggestions may be made as to modification or revision of the propose news story.

This approach represents a enlightened, cooperative effort take some of the bugs out of the relationship between physician and newsmen. More than the it provides an ethical, practic mechanism whereby the profession can tell its own story more than the story of the profession of of the profession

effectively.

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Are menstrual tampons

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OBVIOUSLY NOT! On the other hand—are they sufficiently important to justify the review of a few pertinent facts? Decidedly, yes!

For tomorrow, the patient whose esteem he especially cherishes, may purticularly want to know how to escape a vulvar irritation that periodically distresses her . . . how to secure the advantages of internal absorption without orificial stress . . . how to obtain adequate protection during days of profits discharge . . . or—any of a dozen questions of equally real importance to htt.

For her benefit, the physician will recall-

... that Tampax's compression to one-sixth its normal size, in an individual one-time applicator, facilitates high, easy insertion;

... that only Tampax (of all menstrual tampons) expands "flat"—unforming with physiologic certainty and subjective comfort to the flat consection of the collapsed vagina;

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... that its superior absorbency gives its long fibres a wick action that "sults up" the flux with active freedom, preventing any blocking of the flow;

... that only Tampax (of all menstrual tampons) is "cross-fibre" stitched to prevent disintegration in situ; with its moisture-resistant cord an inseparable extension of that stitching, to permit gentle, dainty removal, intact;

... that Tampax can be secured in any of three sizes (Super, Regula, Junior) to meet individual daily needs;

... that hundreds of thousands of patients have found new comfort—ww convenience—and a new sureness of poise by switching to Tampax.

The physician who explains all these things to his patient will probable find that (if she is like most patients who have been so helped), her mensmul hygiene will be vastly improved, and her gratitude will be sincere.

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my physical standards have put a lowered to such an extent cally taphysician may now be ac-ted for limited service as an fut. ter even if, under certain cirnstances, he is minus a leg or n Army Surgeon General Mahas decreed.

Deviation from normal weight also been eliminated as a mer to medical men who wish enter military service. Those and are as much as 20 per cent eweight or 12.5 per cent unweight are now eligible to beme officers, provided they have thronic disease.

mmissions in Air Force

he army air force seeks to inuse its medical personnel by m physicians between July 1 the end of 1942. The Proement and Assignment Servhas received a request for 2,physicians to be commis-ED ned in the air force by July 1, for an additional 600 monthuntil the end of the year. ong the qualifications speciare that 80 per cent of the tors must be under 37, while remainder may be between

37 and 45. Physicians in the older group must be certified specialists, preferably in ophthalmology, surgery, or neuropsychiatry.

First-Aid Supplies

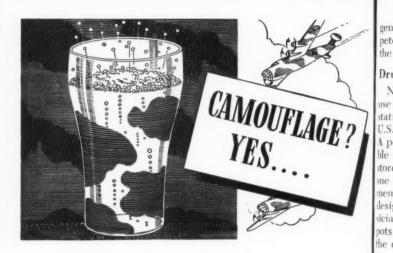
A shortage of surgical gauze, bandages, and other medical essentials, caused by a wave of hoarding and over-buying, may threaten the supplies available for military forces and civilian defense needs, according to Dr. George Baehr, chief of the medical division, Office of Civilian Defense. He declared recently that millions of first-aid kits are being installed in places where there is practically no likelihood they will ever be used. Said he:

"One city has purchased 50,-000 first-aid kits for its school teachers; and every warden's post, apartment building, and every floor of every municipal building is being equipped with first-aid supplies.

"This unlimited purchase of first-aid materials is based on a wrong conception of the nature of air-raid casualties. These casualties (based on England's experience) are usually of such severity that only trained emer-

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Average dose—1 to 1½ heaping teaspoonfuls in water.

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gency medical field units are competent to attend the injured at the site of an accident."

Drug Storage

Narcotics for civilian defense use must be stored in local police stations, under a ruling of the U.S. Commissioner of Narcotics. A police officer will be responsible for the drugs while they are stored at the station, and will issue them only upon receipt of a memorandum from a "properly designated medical officer." Physicians at emergency medical depots will be held responsible for the drugs for their posts.

Rubber Rules Relaxed

Rubber will be available for the manufacture of most articles necessary to the average medical practice, according to a recent War Production Board amendment to an earlier curtailment order. Among the articles for which subber will be released are acoustic aids; blood pressure bags; finger cots; feeding nipples; pessuries and prophylactics; surgeon's gloves; tubing and cathelers; X-ray sheets, aprons, gloves, and cooling hose.

Workers Rehabilitated

A rehabilitation clinic to prepare partially disabled men for work in war industries was started recently in Connecticut by Govmment agencies working with the State medical society. Physial condition, intelligence, and pecial aptitudes for clerical or mechanical work were included in the preliminary examinations given handicapped workers. The State commissioner of education, indicating that the idea was experimental, referred to the clinic as a "one-stop super-service station" devised to meet the demands for workmen to replace those called to military service.

Medical Service Plans

At least 627,000 persons are currently included in non-profit medical service plans sponsored by the profession. Among the approved programs now in operation are these:

California Physicians' Service, 41,000 persons insured; Medical Expense Fund of New York, 1,000 persons; Medical Service Association of Pennsylvania, more than 5,000; Michigan Medical Service, 450,000; Western New York Medical Service Plan, 10,000; plus 120,000 persons in 33 plans in Oregon and Washington.

Plans have also been organized in New Jersey, Idaho, and Utah. Enabling legislation has been passed in West Virginia, Ohio, Massachusetts, and Connecticut.

Music vs. Fatigue

Ultra-violet rays and transcribed music are among the devices now used by the Bristol-Myers Company, of Hillside, N.J. to help maintain employes' health and morale,

A battery of 104 ultra-violet

lamps, installed in the plant's air-conditioning system, helps sterilize the 40,000 cubic feet of air circulated by the system each minute. Music and occasional news programs are broadcast during four hours of each working day through 165 loudspeakers. Company officials believe the music, which masks manufacturing noises, is effective in helping to reduce fatigue.

Journals to the Fore

A greater dependence on medical journals for information about new pharmaceuticals is reported to be developing among British medical men. Reason: The government has called into service many of the detail men who previously furnished doctors with direct information about advances in the drug field.

P&AS Emblems

Each physician who fills out an enrollment questionnaire from the Procurement and Assignment Service will receive a certificate to hang on his wall and will be authorized to wear an insignia on his lapel, according to Lieut. Col. Sam Seeley, director of the service. These will identify him as having offered his professional services to the country in its wartime needs.

\$10,000,000 Contribution

"An outright donation of over \$10,000,000 has been made in the cause of national defense by the medical profession," reports an editorial in the Seattle (Wash.) Daily Journal of Commerce. The figure is based on an appraisal of \$5 each for the 2,000,000 selectee examinations which have been made without charge by physicians.

Medical-Expense Deduction

A limited deduction for "extraordinary medical expense" will be allowed Federal income-tax payers if a plan of the Treasury Department becomes law. In his recent proposal for mandatory joint income tax returns, Randolph Paul, Treasury tax adviser, recommended an allowable deduction for all medical expense that exceeds a specified percent-

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age of a family's net income. He suggested a 5 per cent allowance, with a maximum allowable deduction of \$2,500.

Bomb Insurance Planned

Government insurance against the bombing of private dwellings and offices will be made available to the public in the near future, according to Washington sources. Plans are under way for the establishment of an agency under the Reconstruction Finance Corporation to handle the insurance. Rates are expected to be about fifteen to twenty cents per \$100.

Interne Balks at Climb

An interne in a Bayonne, N.J., hospital was recently threatened with violence by a crowd of angry workers when he refused to climb to the roof of a building to attend an injured steeplejack.

The man had fallen from a chimney stack to the roof of a boiler house. When the interne, a 45-year-old French refugee, arrived at the scene, he informed onlookers that he was unable to climb either the twenty-five-foot ladder or the six flights of stairs to the roof. He explained that he was suffering from high blood pressure and claustrophilia, and

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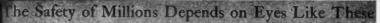
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THROUGH the cold dank dusk a watcher scans the gaps between the attered clouds. His first glimpse of onming bombers sounds the alarm that eds thousands to the safety of their diters and the defenders to their duties. For thousand miles away, aboard a avily laden freighter, the captain studies is silhouette of a ship on the horizon, determine whether friend or foe. This serious work for binoculars, work withy of those known as the world's

Bausch & Lomb is a builder of such loculars. Producer, too, of many other truments that utilize the principles of optical science to the advancement of the common good; of metallographic microscopes, through the use of which research physicists obtain more nearly impenerable armorplate—or build extra thousands of hours into airplane engines; of spectrographs that analyze the chemical composition of crude oil—or of a die casting; of spectacle lenses that open up a world of learning to a school child whose mind might have been dulled by defective vision.

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added that he "would be of no use to anybody after the climb." Only the arrival of police and firemen saved him from subsequent harm at the hands of workers who had threatened to throw him into a near-by bay.

Sharply criticizing the crowd's behavior, the hospital director later disclosed that the interne

had offered his resignation be-

cause of ill health a week before

the incident.

Ethics in Optometry

It is unethical for optometrists in New York State to advertise the cost of eveglass frames, lenses, or examinations, according to a recent ruling of the State's Board of Regents. Also restricted are offers of discounts or free examinations.

Women M.D.'s for Army

Women physicians have petitioned President Roosevelt and army and navy heads for medical reserve commissions with the same pay and privileges as their male colleagues. The step was taken by the directors of the American Medical Women's Association.

Disputing the objection of medical corps officials that it is difficult for women to travel with fighting units, Dr. Emily D. Barringer, president of the A.M.W.A. asserted that since nurses enter wartime service, women physicians should also prove valuable. particularly at base hospitals.

Unlike the navy, the army does not specify that its medical personnel be restricted to men.

Phone-Rate Case Ends

A New York court has dismissed the five-year-old telephone rate suit brought by Dr. Henry C. Eichacker, of Jamaica, N.Y., against the New York Telephone Company. Instituted at the time Dr. Eichacker was president of the Queens County (N.Y.) medical society, the suit was for a refund of \$209, the difference between the commercial phone rate which Dr. Eichacker had been paying for use of a phone ote th in his home-office, and the lower stcan residential rate available. Core of No co the dispute was not whether doctors are eligible for the lower rate (they are), but whether the com- ad C pany is legally obliged to notify LINIT a subscriber that a lower rate is cation open to him.

According to E. F. W. Wildermuth, attorney for the plaintiff, the case was not dismissed on its merits, but simply because the physician was unwilling to incur FFE the financial obligation of con-

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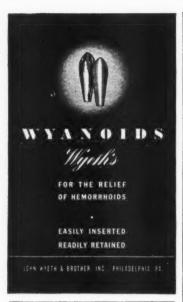
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"A TIME-TRIED SENIOR-JUNIOR PARTNERSHIP"

Article reprints available

The popularity of a 1937 MEDICAL ECONOMICS article on partnership contracts led to its revision and republication in 1939 under the title "A Time-Tried Senior-Junior Partnership." To answer the continuing demand for copies, reprints have now been made available at the cost price of 10 cents each. Address: Medical Economics, Inc., Rutherford, N.J.

The article explains in detail the three fundamental types of joint-practice arrangements between older and younger physicians-the assistant association, the office-sharing plan, and the contractual partnership. The text of a sample contract is included.

tinuing it. Wildermuth charged that the New York State medical society had failed to render expected financial assistance.

Narcotic Records

It is not necessary for a physician to keep a record of the attenuated narcotic preparations he dispenses, provided that he dispenses them to patients upon whom he is in personal attendance. This ruling was handed down recently by U.S. Supreme Court Justice Murphy, and applies to such preparations as cough syrup, paregoric, etc.

Immunization Poll

While a high percentage of the opr Brew general public is aware of the benefits of immunization, too few rgan American mothers have their chilledust dren inoculated. To illustrate: ound

Eighty-one per cent of the Nation's mothers appreciate the value of diphtheria immunization, yet 32 per cent fail to take ad he re vantage of it. Smallpox vaccination is compulsory in many States toder and its advantages are known to det 83 per cent of American moth 8 a ers, yet only 61 per cent take ookle their children to a doctor for in waila oculation.

These facts are disclosed in a omba nation-wide survey conducted by tup Elmo Roper, well-known public opinion pollster, and sponsored by Send for oklets. Sharp & Dohme, Philadelphiad (2) pharmaceutici manufacturers deress: Soundness of the findings may be judged by A Roper's forecast of the 1940 meridential elections

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the protect the future of beer, the the prewing Industry Foundation was few ganized in 1936 by the brewing chil

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In the years since 1936, this condation has put into operation far-reaching program to improve social conditions surrounding additional retail sale of beer.

At the same time, important cinal odern research was sponsored was to determine the facts about beer noth a beverage. (An interesting take booklet describing this research is or in valuable on request*.)

The Foundation's first step in in a mbatting retail abuses was to end by tup State organizations of brew-

al.

ers, beer distributors, and retailers, headed by an administrator of proven ability and integrity. These State committees then cooperated with the legally-constituted law-enforcement officers to "clean up or close up" all offending retail establishments.

Today, this program is in effect in 15 States and is being extended to others. A similar program is in effect in the vicinity of army posts. Both programs are now showing imposing results in improved conditions.

For more information on this interesting social program, write us—see note below.

ed by Send for these booklets: Write for both of these interesting, informative free boklets...(1) "Scientific Moderation in Drinking," a report on recent research, 19hiad (2) "Clean Up or Close Up," the story of a remarkable social program. unersides: Brewing Ind oundation, Dept. K2, 21E. 40th St., New York, N.Y.



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to within one-half of one per cent of absolute accuracy.

The immunization survey also reveals that 47 per cent of parents realize the desirability of whooping cough immunization, but only 31 per cent have it done; 66 per cent appreciate the benefits of typhoid inoculation, yet only 19 per cent have their children immunized; 53 per cent believe in scarlet fever immunization, but only 10 per cent have ever availed themselves of its benefits.

In view of the widespread failure to have children immunized, the pharmaceutical house which sponsored the poll offers physicians without charge a supply of immunization record cards. These cards provide a means of keeping a complete immunization history of each patient. Duplicate cards, to be given to patients, explain the benefits of inoculation and serve as a reminder of reinoculation dates.

Taxicab Ambulances

Plans to convert taxicabs into emergency ambulances for use during air raids are now under study in several U.S. cities. It's reported that in New York and Chicago some 7,000 taxis which have landaulet tops can be quickly arranged to carry two injured

persons on stretchers. In Washington, D.C., taxicab companies are installing stretcher-supporting brackets in 1,000 cabs so that they can be quickly pressed into ambulance service.

Meanwhile, the War Department is converting a number of Pullman cars into hospital ward cars. Each car will be staffed by three orderlies and three nurses; each has a bed capacity of thirty-two patients.

\$10,000 for Blood

Having donated more than seventy-two gallons of blood in 328 transfusions, James J. Ryder, a Boston night watchman, claims he has established the world's transfusion record. In thirty-five years his blood has earned him some \$10,000, much of it in the "good old days when the wealthy would pay as much as \$500 for Grade A blood."

After his 350th transfusion Ryder plans to retire. Warning him against stopping his donations too suddenly, his doctor has advised Ryder to taper off cautiously.

Bank Aids Medical Plan

A new scheme to publicize professionally-sponsored health insurance and to simplify the collection of premiums has been in-

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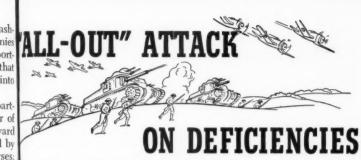
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augurated by the Medical Expense Fund of New York, Inc. Through an arrangement with a Long Island (N.Y.) bank, each depositor receives a slip with his cancelled checks which briefly describes the benefits offered by the fund. Bank patrons who subscribe to the medical service plan have their premiums collected once a month by means of "charge memos" which authorize deduction of the premiums from their accounts.

Public Health Needs Urgent

The increased responsibility of the Public Health Service "in holding the lines against preventable disease" during wartime demands the participation of more physicians. This point was stressed by the service's surgeon general, Thomas Parran, in the course of a recent speech in Chicago.

Most urgently needed, Dr. Parran said, are the "full-time services of a trained industrial physician in every large plant. Less than one-seventh of our workers have that service now."

The surgeon general estimated

that about 3,500 full-time doctor are at present engaged in Federal, State, and local public health work. An additional 1,000, he said, are needed to fill vacancies brought about by the call to active duty of many reserve officers.

"Only a small fraction of the doctors needed now by the Public Health Service...can be drawn from private practice and put to work without intensive, special training. Public health skill... requires the capacity to translate a doctor's clinical knowledge of disease into a system of control that will not only check the disease in the individual but protect the community against it. Dr. Parran declared.

It may not be generally known he said, that members of the commissioned corps of the Publi Health Service receive their commissions from the President, with pay and rank equal to that of officers in the medical corps of the armed forces.

Referring, incidentally, to the medical needs of the army and navy, Dr. Parran declared that

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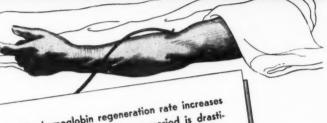
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†Fowler and Barer: "Rate of Hemoglobin Regeneration in Blood Donors." J.A.M.A., 118:421:1942.

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It also constitutes a desirable hemostatic agent to aid in the control of excessive bleeding. And as an oxytocic, it is frequently of benefit in facilitating involution of the mostpartum uterus.

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*Watson, E. M.: Nutritional Requirements During Pregnancy, Can. Med. Assn., 1939.

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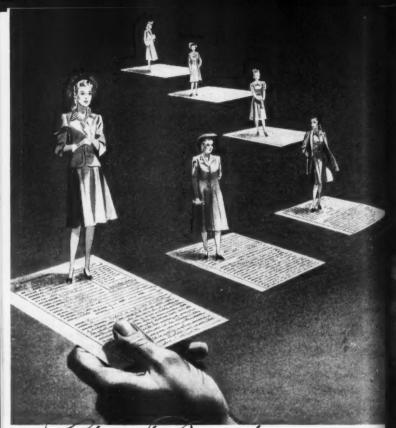
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